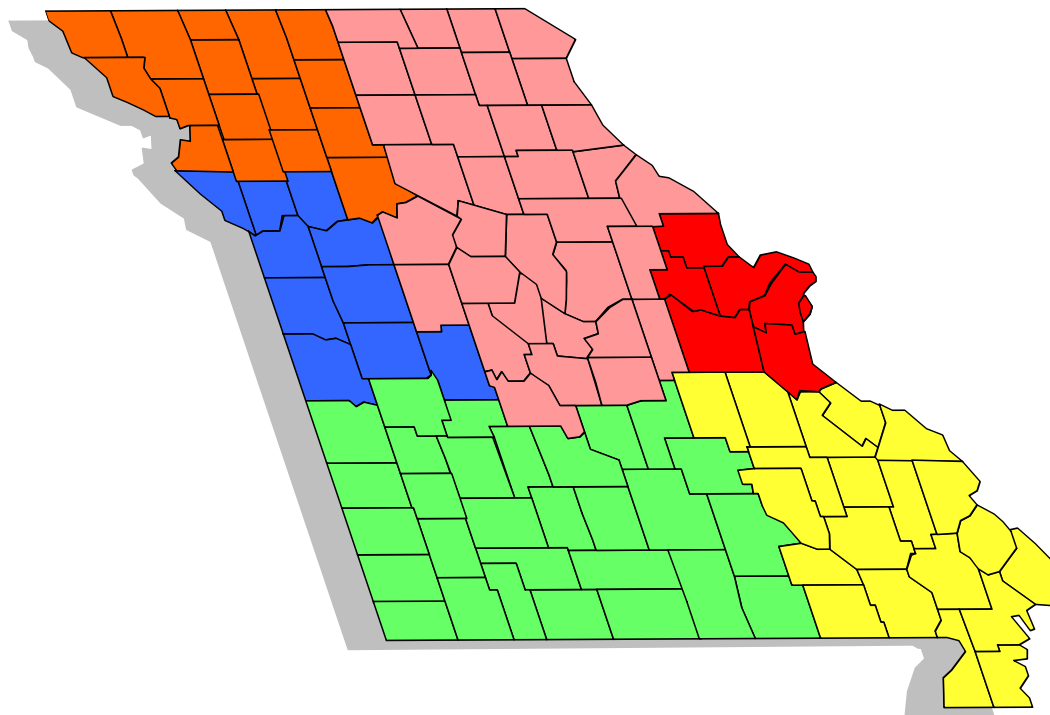


2001 Epidemiologic Profiles of HIV Disease and STDs in Missouri



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http://www.dhss.state.mo.us/HIV_STD/HIVstatsheet.html**

**MISSOURI 2001 *EPIDEMIOLOGIC PROFILES of HIV DISEASE
and STDs in MISSOURI***

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General Guidelines for Interpreting the 2001 Epidemiologic Profiles of HIV Disease and STDs in Missouri

- The *2001 Epidemiologic Profiles of HIV Disease and STDs in Missouri* is intended to be a generally comprehensive summary of the epidemiology (i.e., occurrence) of HIV Disease and sexually transmitted diseases (STDs, specifically the reportable bacterial STDs gonorrhea, syphilis, and chlamydia) in Missouri through December 2001. Its primary audience is persons engaged in developing, evaluating, and modifying HIV/STD prevention services. The *2001 Epidemiologic Profiles* should also serve as a useful reference for anyone wishing to understand the epidemiology of HIV disease and STDs in Missouri, and in each of the state's six HIV Regions.
- It is obvious that persons with different interests and different purposes have need for HIV Disease and STD data. To respond to these differences, the *Epidemiologic Profiles* uses several different formats to present these data, as well as other information important for understanding the occurrence of these diseases in Missouri:
 - Executive Summary and Analysis of HIV Disease and Sexually Transmitted Diseases in Missouri
A 14 page narrative summary/analysis of the epidemiology of HIV Disease and STDs in Missouri, including implications for prevention efforts.
 - Missouri State Summary
A detailed description – using tables, graphs, maps and text – of the epidemiology of HIV Disease and STDs in Missouri.
 - Missouri Demographic Data
Uses material developed by the Missouri Economic Research and Information Center (MERIC) based on the results of the 2000 census.
 - Behavioral Survey Information
Presents data from selected sections of the Missouri Behavioral Risk Factor Surveillance System (BRFSS) and the Missouri Youth Risk Behavior (YRBS) surveys.
 - Summaries of the epidemiology of HIV Disease and STDs in each of Missouri's six HIV Regions
These summaries are similar to the Missouri State Summary in presenting a detailed description – using tables, graphs, maps and text – of the epidemiology of HIV Disease and STDs in each of the state's HIV Regions.
 - Internet Resources
The Internet has become a very important source of information on HIV Disease and STDs for medical professionals, policy makers, and the general public. This section provides a listing of useful web sites.
 - Brief Summary of HIV Disease in Missouri, 1982-2001
A short 3-page narrative summary – no tables, graphs, or maps – of HIV Disease in Missouri using a bullet-point format. Designed to present the most important points relative to the epidemiology of the disease in the state.
 - HIV/STD Statistics
An 8-page summary – using tables, graphs, and maps – of the epidemiology of HIV Disease and STDs in Missouri.
- In order to understand the epidemiology of HIV disease in Missouri as presented in this document, it is essential to know what is meant by the terms HIV Disease, HIV case, and AIDS case. From the time a

person is infected with human immunodeficiency virus (HIV) until death, he/she has **HIV Disease**. All persons with HIV Disease can be subclassified as either an **AIDS case** (if they are in the later stages of the disease process and have met the case definition for AIDS) or an **HIV case** (if they are in the earlier stages of the disease process and have not met the AIDS case definition). Additional discussion of these terms is found throughout the document.

- The patterns of occurrence of AIDS cases (and deaths) are not only the result of past trends in HIV infections, but also reflect access to, utilization of, and the effectiveness of available treatments. In recent years, with the advent of highly active antiretroviral therapy (HAART), treatment-related issues have become very important factors in determining numbers of new AIDS cases (and deaths), and trends in AIDS cases can no longer be seen as reflecting trends in new HIV infections.
- HIV cases, which generally represent persons more recently infected, can potentially provide information regarding current HIV infection trends. HIV cases can also provide information on which subpopulations are presently at increased risk for acquiring HIV infection, and toward which prevention efforts should be targeted.
- AIDS cases, and in some instances HIV cases, are described by year of report. In addition, HIV cases are also described by year of diagnosis, which represents an attempt to approximate trends in new HIV infections (HIV incidence).
- Throughout this document, whenever reference is made to HIV cases reported in 2001, this means HIV cases reported during that year which remained HIV cases at the end of the year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included (instead, these cases are included among AIDS cases reported in 2001).
- The information obtained on each reported case of HIV disease includes the person's race/ethnicity. As a result, each case is classified as one of the following: White non-Hispanic, Black non-Hispanic, Hispanic, Asian/Pacific Islander, or American Indian/Alaskan Native. In the text of this document, whenever HIV Disease cases are being discussed, the term "white" means White non-Hispanic, and "black" means Black non-Hispanic.
- The information obtained on reported cases of gonorrhea, syphilis, and chlamydia does not consistently include specific information on Hispanic ethnicity. As a consequence, in this document, any discussion of gonorrhea, syphilis, and chlamydia cases includes only information on race (and not ethnicity). Thus for these diseases, each case is classified as white, black, Asian, American Indian, or other.
- Reports on the geographic location of HIV disease or STD cases are based on the patient's residence at the time of diagnosis, which may or may not correspond to his/her residence at the time of initial infection, or to his/her current residence.
- The term "Outstate Missouri" refers to all of Missouri outside St. Louis City, St. Louis County, and Kansas City.
- Persons living in Federal correctional facilities located in Missouri at the time of their diagnosis as an HIV or AIDS case are not included in the data presented in this profile. These individuals were generally not residents of Missouri prior to their incarceration, and to include them in the analysis of the epidemic in the state would result in a distorted epidemiologic picture.
- Persons living in Missouri correctional facilities (which include state, county, and local facilities) at the time of their HIV/AIDS diagnosis are included in the statewide data, since most of these individuals

were likely Missouri residents prior to their incarceration. However, persons living in Missouri correctional facilities are not included in the HIV/AIDS data for specific geographic regions (e.g., St. Louis City, Kansas City, the HIV Regions). This is based on the fact that these individuals, especially those in the state prison system, are often incarcerated in another location from where they resided (and were likely infected) prior to their imprisonment. If they were included among the cases from the area where they were imprisoned at the time of diagnosis, this could distort the picture of the epidemic in that area.

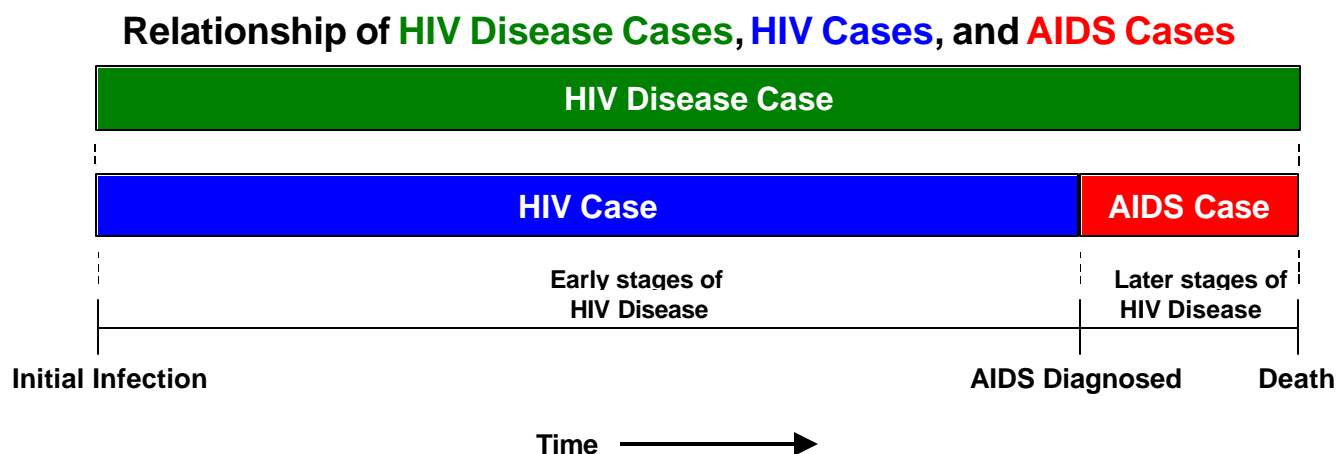
- The data in this profile do not include cases of HIV infection reported in persons anonymously tested at the state's four anonymous testing sites in St. Louis City, Kansas City, Springfield, and Columbia.
- In order to help compare the relative impact of HIV Disease and specific STDs in different racial/ethnic groups and in different geographic areas, disease case rates are presented throughout this document. The population data used in calculating these rates are 1999 population estimates from the U.S. Census Bureau. (Data from the 2000 census are becoming available, but are not yet detailed enough to allow computation of many of the rates needed for this profile.)
- It may be impossible to make meaningful statements concerning trends in regions with low numbers of HIV or AIDS cases. In general, examining all text and appropriate charts, tables, and graphs, including total numbers of cases and case rates, is crucial to successfully interpreting the profile.
- In the St. Louis and Kansas City HIV Region profiles, AIDS data from adjoining areas of Illinois and Kansas, respectively, are included to provide a more comprehensive description of the impact of the epidemic in the state's two largest metropolitan statistical areas (MSAs).
- In January 1993, the AIDS case definition was broadened to include individuals with HIV infection who have a CD4+ lymphocyte count less than 200 cells/mm³ or a CD4+ percentage less than 14%, as well as HIV-infected persons with one of three additional conditions (pulmonary tuberculosis, invasive cervical cancer, or recurrent pneumonia). These changes in the case definition primarily account for the dramatic, one-time increase in the number of AIDS cases reported during 1993.
- The document has a section entitled "Behavioral Studies", which includes results from selected questions contained in the 1999 Behavioral Risk Factor Surveillance System (BRFSS) survey and the 1999 Youth Risk Behavior Survey (YRBS). The BRFSS data summarize HIV/AIDS-related knowledge and attitudes, and HIV testing history, of participants 18-64 years of age who are representative of the general population of Missouri. The YRBS data summarize the responses of Missouri public high school students to questions about sexual behaviors.
- The document also has a section entitled "Internet Resources", which contains addresses to web sites which provide useful information on HIV Disease and STDs.
- The *2001 Epidemiologic Profiles of HIV Disease and STDs in Missouri*, along with profiles from previous years, is available on the Missouri Department of Health and Senior Services (DHSS) web site at http://www.dhss.state.mo.us/HIV_STD/HIVstatsheet.html.

Executive Summary and Analysis of HIV Disease and Sexually Transmitted Diseases in Missouri

HIV Disease in Missouri - 2001 General Summary and Comments

HIV Disease Cases, HIV Cases, and AIDS Cases

From the time a person is infected with human immunodeficiency virus (HIV) until death, he/she has **HIV Disease**. All persons with HIV Disease can be subclassified as either an **AIDS case** (if they are in the later stages of the disease process and have met the case definition for AIDS) or an **HIV case** (if they are in the earlier stages of the disease process and have not met the AIDS case definition). This is illustrated in the following figure.



To understand the epidemiology (i.e., occurrence) of HIV Disease in Missouri, it is necessary to examine not only HIV Disease cases, but also the subcategories of AIDS cases and HIV cases. The patterns of occurrence of AIDS cases (and deaths) are the result not only of past trends in HIV infections, but also access to, utilization of, and the effectiveness of available treatments. In recent years, with the advent of highly active antiretroviral therapy (HAART), treatment-related issues have become very important factors in determining numbers of new AIDS cases (and deaths), and trends in AIDS cases can no longer be seen as reflecting trends in new HIV infections. HIV cases, which generally represent persons more recently infected, can potentially provide information regarding current HIV infection trends. HIV cases can also provide information on which subpopulations are presently at increased risk for acquiring HIV infection, and toward which prevention efforts should be targeted.

Magnitude of the Problem and General Trends

Since 1982, 13,651 HIV-infected Missouri residents (i.e., persons with HIV Disease) have been reported to the Missouri Department of Health and Senior Services. Of these 13,651 HIV Disease cases, 9,119 (66.8%) are subcategorized as AIDS cases, and the remaining 4,532 (33.2%) are subcategorized as HIV cases.

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The annual number of newly reported (i.e., initially reported for the first time to public health officials) HIV Disease cases had decreased each year from 1992 through 2000. However, the 607 HIV Disease cases initially reported in Missouri residents in 2001 represented a 14.1% increase from the 532 cases reported in 2000.

This same pattern is seen when HIV cases are examined by year of diagnosis. Here the annual number of diagnosed cases had been generally decreasing in recent years, but in 2001 (after making adjustments for reporting delays), approximately 475 HIV cases are estimated to have been diagnosed, which would represent an increase of about 13% from the number of cases diagnosed in 2000.

The decreases in recent years in annually reported HIV Disease cases and annually diagnosed HIV cases were believed to reflect, at least in part, a decrease in new HIV infections (i.e., a decrease in HIV Disease incidence), at least in some subpopulations. However, it was recognized that this decrease could also, to some extent, potentially reflect changes in the HIV testing behaviors of at-risk persons and/or changes in the HIV testing practices of providers.

The increase in diagnosed HIV cases in 2001 was, in general, most noticeable in males, whites, and men who have sex with men (MSM), and in St. Louis City and (to a somewhat lesser extent) Kansas City. However, the increase in 2001 cases seen in MSM in St. Louis City included a noticeable increase in cases in black, as well as white, MSM. In addition, in Kansas City, increases in diagnosed HIV cases in 2001 occurred in men who have sex with men and inject drugs (MSM/IDUs) as well as in MSM. Surveillance staff in both St. Louis and Kansas City believe that some increases in new infections in MSM may have been occurring. However, both locations also believe that certain recent changes in surveillance practices (which improved timeliness and completeness of reporting) may have additionally contributed to the reported increase in 2001 cases.

Of the 13,651 reported HIV Disease cases, 8,616 (63.1%) are currently living, and 5,035 (36.9%) have died. The majority (4,857, or 96.5%) of these deaths have been in persons subcategorized as AIDS cases (the 4,857 AIDS cases who have died make up 53.3% of all reported cases of AIDS). During 2001, 150 HIV-related deaths in Missouri residents were reported on death certificates, a decrease of 11.2% from the 169 HIV-related deaths reported in 2000.

Not all HIV-infected persons have been diagnosed and thus made aware of their infection status. It is estimated that the actual number of individuals infected with HIV (i.e., persons with HIV Disease) who are presently living in Missouri is in the approximate range of 9,500 to 13,500 persons. The Centers for Disease Control and Prevention (CDC) has stated that, nationwide, approximately 30% of HIV-infected persons are not aware that they are infected¹ (although a more recent CDC report has indicated that among young gay and bisexual men infected with HIV, the percentage who do not know their infection status may be much higher²¹). An essential component of HIV prevention is to encourage assist persons at risk for HIV infection to be tested so that, if infected, they can optimally benefit from available treatments, and be assisted in making behavioral changes to eliminate/reduce the risk of transmission to others.

Improved antiretroviral therapies have slowed the progress of HIV disease in many infected persons, an achievement especially reflected in the substantial decrease in reported AIDS cases in Missouri from 1996 to 1997, and in HIV Disease deaths from 1995 to 1997 (the mid-1990s were when the widespread introduction of HAART occurred and had its greatest impact). Since the mid-1990s, the downward trend

HIV Disease Epi Profile Summary: Missouri

in AIDS cases has subsequently slowed, and the annual number of HIV Disease deaths has, despite a decrease in 2001, remained generally plateaued the past 5 years. These newer trends likely reflect, at least in part, the limitations associated with current treatment regimens. Other factors that could potentially play a role here include delayed test seeking among certain populations, and limited access to or use of health care services.² There is an obvious need for continued emphasis on prevention of new infections, and for trying to ensure that all infected persons can access needed care services. Everyone needs to clearly understand that “despite medical advances, HIV infection remains a serious, usually fatal disease that requires complex, costly, and difficult treatment regimens that do not work for everyone. As better treatment options are developed, we must not lose sight of the fact that preventing HIV infection in the first place precludes the need for people to undergo these difficult and expensive therapies.”³

The ability of improved treatments to extend the lifespan of AIDS patients is reflected in the consistent increase in the number of persons living with AIDS in recent years, even though the annual numbers of new AIDS cases have been decreasing. At the end of 2001, 4,262 persons who were Missouri residents at the time of diagnosis were living with AIDS; the corresponding numbers for 2000, 1999, 1998, 1997, and 1996 were 4,049, 3,784, 3,496, 3,235, and 3,055, respectively.

Where

Of the 4,532 reported HIV cases: 1,326 (29.3%) were from St. Louis City, 1,154 (25.5%) were from Outstate Missouri*, 1,131 (25.0%) were from Kansas City, and 599 (13.2%) were from St. Louis County.

Of the 9,119 reported AIDS cases: 2,582 (28.3%) were from St. Louis City, 2,535 (27.8%) were from Kansas City, 2,368 (26.0%) were from Outstate Missouri, and 1,416 (15.5%) were from St. Louis County.

Cases of HIV Disease disproportionately occur in the state’s two major metropolitan areas (St. Louis and Kansas City). The highest rates of both HIV and AIDS cases, as well as the largest numbers of cases, are found in these two areas. St. Louis City consistently has the highest case rates, followed by Kansas City, St. Louis County, and Outstate Missouri*.

Of total reported HIV Disease cases, 70.2% come from St. Louis City, St. Louis County, or Kansas City (which together comprise 32.5% of the state’s population). However, 3,522 cases of HIV Disease have been reported from Outstate Missouri (roughly equal to the number reported from Kansas City), and only 5 (4.4%) Missouri counties have no reported HIV or AIDS cases. Clearly, HIV prevention efforts are needed in the Outstate area as well as in St. Louis City/County and Kansas City.

Within both St. Louis City/County and Kansas City, both HIV Disease cases and cases of bacterial STDs generally tend to occur in the same specific areas.** It is within these areas that the needs for prevention and care services are the greatest.

Who

Of the 4,532 reported HIV cases: 3,756 (82.9%) were in males and 776 (17.1%) were in females.

Of the 9,119 reported AIDS cases: 8,225 (90.2%) were in males and 894 (9.8%) were in females.

* The term “Outstate Missouri” refers to all of Missouri outside St. Louis City, St. Louis County, and Kansas City.

** See the zip code maps in the St. Louis and Kansas City HIV Regions sections of the *Epidemiologic Profiles*.

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Of the 4,532 reported HIV cases: 2,445 (53.9%) were in whites, 1,935 (42.7%) were in blacks, 104 (2.3%) were in Hispanics, 14 (0.3%) were in Asian/Pacific Islanders, and 13 (0.3%) were in American Indians.

Of the 9,119 reported AIDS cases: 5,914 (64.9 %) were in whites, 2,966 (32.5%) were in blacks, 182 (2.0%) were in Hispanics, 32 (0.4%) were in American Indians, and 25 (0.3%) were in Asian/Pacific Islanders.

Males continue to make up the largest numbers of reported HIV Disease cases, but certain populations of females appear to be increasingly affected by HIV Disease. Females now make up 17.1% of all reported HIV cases, and 9.8% of all AIDS cases. Of AIDS cases reported in 2001, females made up 18.6%; by comparison, of AIDS cases reported five years previously (in 1996), only 12.1% were in females.

Increasing involvement by certain black populations also appears to be occurring and, significantly, beginning in 1999 and continuing through 2001, more HIV and AIDS cases were reported in blacks than in whites. In 2001, blacks made up 47.9% of reported HIV cases and 53.2% of reported AIDS cases. Given that blacks make up only about 11% of the state's population, this clearly indicates their very disproportionate representation among HIV-infected persons. (Blacks are also very disproportionately represented among reported cases of gonorrhea, chlamydia, and syphilis; see below under the discussion of these diseases.)

For Hispanics, the rates for HIV and AIDS cases reported in 2001 were approximately 2-1/2 times those seen in whites – but the total numbers of cases reported in Hispanics (10 HIV cases and 8 AIDS cases in 2001) have been small. However, there are some reasons for concern that HIV Disease might be, or might become, a more significant problem for Hispanics in Missouri than current numbers seem to indicate. First, it is possible that among reported HIV and AIDS cases, because of incorrect information provided on the case report forms, a higher proportion may actually be of Hispanic ethnicity than is indicated by the current numbers. Second, the Hispanic population is increasing rapidly in Missouri. According to 2000 census data, Missouri's Hispanic population grew by 92.2% during the period from 1990 to 2000 (from 61,698 in 1990 to 118,592 in 2000); in contrast, Missouri's total population grew by only 9.3% during this time.⁴ Third, persons of Hispanic ethnicity in some areas of the U.S. have been heavily impacted by HIV/AIDS, and this impact might also begin to be seen in Hispanics in Missouri. A final point with regard to persons identified as Hispanic is that these individuals actually consist of a diverse mixture of ethnic groups and cultures, and this points to the need for specifically targeted prevention efforts.⁵

Numbers of reported HIV and AIDS cases in Asians and American Indians have been very small; each of these two groups comprises less than 0.5% of total reported HIV and AIDS cases. In 2001, 1 HIV case was reported in an Asian, no HIV cases were reported in American Indians, 5 AIDS cases were reported in Asians, and no AIDS cases were reported in American Indians.

(It should be emphasized that race/ethnicity itself is not a risk factor for HIV infection; however, among many racial/ethnic minority populations, social and economic factors are associated with high rates of HIV risk behavior. These factors also may be barriers to receiving HIV prevention information or accessing HIV testing, diagnosis, and treatment.⁶)

The majority of new HIV infections are acquired by persons 20-39 years of age, and infections are also occurring in teenagers. CDC estimates that, nationwide, about half of all new HIV infections are in young people under 25 years of age.¹

In 2001, 2 infants born to HIV-infected mothers are known to have become infected with the virus through mother-to-infant (perinatal) transmission. More generally, the proportion of HIV-exposed infants who became

HIV Disease Epi Profile Summary: Missouri

infected was noticeably less for those born during the period from 1995-2001 compared to those born during the earlier period from 1993-1994 (6.9% vs. 26.4%). This difference reflects the use, starting in mid- to late-1994, of zidovudine (AZT, ZDV) treatment to reduce the risk of perinatal HIV transmission. It remains vitally important for all pregnant women to receive adequate prenatal care, starting early in their pregnancy, and to know their HIV status so that, if infected, they can take advantage of antiretroviral treatment to significantly reduce the risk of HIV transmission to their child, and also receive optimal treatment for their own disease. Prenatal providers should encourage all pregnant women to undergo voluntary HIV testing. Such testing should be viewed as a routine part of prenatal care for all women who are pregnant.⁷

Major Exposure Categories

There are currently four major exposure categories into which almost all adults/adolescents recently infected with HIV can be placed: 1) men who have sex with men (MSM); 2) heterosexual contacts; 3) injecting drug users (IDU); and 4) men who have sex with men and inject drugs (MSM/IDU).

Men Who Have Sex With Men (MSM)

It is estimated that 2,862 (63.8%) of the 4,487 reported adult/adolescent HIV cases, and 6,454 (71.3%) of the 9,051 reported adult/adolescent AIDS cases, are MSM. It is estimated that approximately 246 new HIV cases were diagnosed in MSM in 2001.

The largest numbers of reported HIV and AIDS cases continue to be in MSM, although there is evidence that, among persons more recently infected with HIV, a smaller proportion are MSM.

HIV infection is a problem among both white and black MSM; more cases have been reported from white MSM, but black MSM are likely experiencing higher rates of infection. Of total reported HIV cases in MSM, 61.4% were in white men, 35.3% were in black men, and 2.4% were in Hispanic men.

Most MSM who become infected with HIV likely do so while in their twenties or thirties, but infections are also occurring in teenagers. Black MSM in Missouri may, in general, be infected at somewhat younger ages compared to white MSM. (CDC has data from other states which suggest that, in general, racial/ethnic minority MSM may become infected at younger ages compared with white MSM.⁸)

The majority of HIV-infected MSM are from either the St. Louis or Kansas City metropolitan areas. Of total reported HIV cases in MSM, 75.0% were in men living in either St. Louis City, St. Louis County, or Kansas City at the time of diagnosis; in addition, 66.9% of white MSM HIV cases, 88.7% of black MSM cases, and 85.5% of Hispanic MSM cases were from one of these three locations.

It is estimated that approximately 265 new HIV cases were diagnosed in MSM in 2001. The annual number of diagnosed HIV cases in MSM generally decreased during the period from 1990-2000, but then apparently increased by approximately 40 cases from 2000-2001. Most of the increase in 2001 was from St. Louis City, where the estimated numbers of diagnosed cases in black and white MSM increased by about 20 cases and 10 cases, respectively. In Kansas City, a smaller increase of about 10 diagnosed HIV cases appeared to occur in 2001, involving mostly white MSM. (In addition, among mostly white MSM/IDU in Kansas City in 2001, there was an increase of about 8 diagnosed cases.) Whether these upward trends will continue in 2002 is unclear; however, the possibility that the increases seen in 2001 in St. Louis and Kansas City might reflect, at least in part, a recent increase in new HIV infections in MSM is of concern. It

HIV Disease Epi Profile Summary: Missouri

should be noted that CDC has been expressing its own concern that the risk for HIV transmission among MSM may be increasing, at least in some parts of the country. Evidence for this includes the fact that increased rates of infectious syphilis, gonorrhea, and chlamydial infection, largely among HIV-infected MSM, have been recently reported in many cities in the U.S. and other industrialized countries. Preliminary data also indicate higher frequencies of unsafe sex, and suggest that the incidence of HIV infection may be rising among MSM in some cities. The underlying behavioral changes likely are related to effects of improved HIV/AIDS therapy on quality of life and survival, “safer sex burnout,” and in some cities, adverse trends in substance abuse.⁹

Heterosexual Contacts

It is estimated that 880 (19.6%) of the 4,487 reported adult/adolescent HIV cases, and 846 (9.3%) of the 9,051 reported adult/adolescent AIDS cases, are heterosexual contacts. It is estimated that approximately 128 new HIV cases were diagnosed in heterosexual contacts in 2001.

Certain subpopulations of heterosexuals appear to be increasingly affected by HIV Disease. There is, in contrast to the situation in MSM, evidence that in persons more recently infected with HIV, a larger proportion are heterosexual contacts.

The majority of reported heterosexual contact HIV and AIDS cases have been in women. The fact that there are fewer male cases may, in part, be related to two factors. First, some heterosexual contact female cases were infected by bisexual men. However, if these bisexual men are themselves diagnosed and reported, they will, according to the current classification scheme, be categorized as MSM (not heterosexual contact) cases. Second, adolescent and young adult men are less likely to be seen by a medical provider than are females of the same age. Consequently, young females may have more opportunity to receive HIV testing and thus be more likely, if infected, to be diagnosed and reported than are young men.

Black women are especially affected, making up 46.3% of total reported heterosexual contact HIV cases (white women make up an additional 26.6%). Heterosexual contact is the predominant way that women in Missouri are infected with HIV (slightly more than 75% of female HIV cases were probably infected through heterosexual contact), and among more recently infected women, a higher proportion are likely to have been infected through this mode of transmission.

The largest proportion of heterosexual contact cases were probably initially infected while in their twenties. However, teenagers (especially females) are also being infected with HIV through heterosexual transmission (15.9% of black female heterosexual contact HIV cases, and 10.6% of white female heterosexual contact HIV cases, were initially diagnosed while in their teens; in addition, it is highly likely that some persons diagnosed as HIV cases in their twenties were initially infected while in their teens).

The majority of HIV-infected heterosexual contacts are from either the St. Louis or Kansas City metropolitan areas. Of total reported HIV cases in heterosexual contacts, 64.0% were in persons living, at the time of diagnosis, in either St. Louis City, St. Louis County, or Kansas City (which together comprise 32.3% of the state's population). In addition, 36.1% of white heterosexual contact HIV cases, 82.2% of black heterosexual contact cases, and 50.0% of Hispanic heterosexual contact cases were from one of these three locations.

It is estimated that approximately 150 new HIV cases were diagnosed in heterosexual contacts in 2001. Since 1990, and in contrast to trends in the other major exposure categories, the annual number of diagnosed

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HIV cases in heterosexual contacts has generally been increasing. However, this general upward trend in diagnosed cases is only seen in blacks, whereas in whites the annual number of diagnosed cases has essentially remained plateaued.

Given the increasing number of heterosexual contact HIV cases being reported, and the known presence of high risk sexual behaviors among many heterosexuals, prevention efforts directed to at-risk subpopulations of heterosexuals are vital.

Among the subpopulations of concern are teenagers. Results from the Missouri Youth Risk Behavior Survey (YRBS) indicate that many teenagers are engaging in sexual behaviors that place them at risk for sexually transmitted infections, including infection with HIV.¹¹ Such risky behaviors are reflected in the fact that teenagers make up a substantial proportion of reported cases of gonorrhea and chlamydia. Among gonorrhea cases reported in Missouri in 2001, persons 13-19 years of age made up 42.9% of black female cases, 42.7% of white female cases, 20.3% of black male cases, and 14.9% of white male cases.

Behavioral survey (HITS II) results from (heterosexual) STD clinic patients indicated the continuing presence of behaviors associated with HIV (and other STD) transmission, such as multiple sexual partners, inconsistent condom use and non-injectable drug use. The findings also indicated that some of these individuals may be less careful than before regarding sexual (or drug-using) behaviors because of their knowledge of more effective HIV treatment regimens. Persons who receive services in STD clinics, as well as other persons with a recent history of an STD, comprise populations in continuing need of effective prevention services.¹⁰

Prevention activities must additionally address bisexual men with (or at risk for) HIV infection, since these individuals form a bridge between infected/high risk male homosexual and heterosexual populations. In this regard, it is significant that information obtained through interviews indicates that at least 24% of reported MSM HIV Disease cases state they have also had sex with a female(s), and among reported cases in MSM/IDUs, the figure is at least 44%. (This latter percentage is consistent with the results of a recent CDC-supported study which interviewed HIV-infected MSM/IDUs in 12 states [not including Missouri] and found that 43% reported having had sex with women in the preceding five years.¹²)

Injecting Drug Users (IDUs)

It is estimated that 418 (9.3%) of the 4,487 reported adult/adolescent HIV cases, and 703 (7.8%) of the 9,051 reported adult/adolescent AIDS cases, are IDUs. It is estimated that approximately 26 new HIV cases were diagnosed in IDUs in 2001.

Sharing of syringes and other drug paraphernalia among persons who inject drugs has been a less common means of transmitting HIV in Missouri compared to the situation in a number of other states; however, IDUs do make up approximately 9% of Missouri's total reported adult/adolescent HIV cases (and an additional 6% of cases are in MSM who also report injecting drug use [MSM/IDU]; see the next section).

Males, and blacks, are disproportionately represented among reported HIV cases in IDUs. Of total reported IDU HIV cases, males make up 69.9%, and blacks comprise 49.2%.

Most HIV-infected IDUs are in the range of 20-39 years of age when they acquire their infection; a relatively small number appear to acquire their infection while teenagers.

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Of total reported HIV cases in IDUs, slightly less than half (48.2%) were in persons living in either St. Louis City, St. Louis County, or Kansas City at the time of diagnosis (although 69.9% of black cases were from one of these locations). One out of every five (20.2%) IDU HIV cases were diagnosed while in correctional facilities (by contrast, 5.3% of heterosexual contact HIV cases were diagnosed while in a correctional facility setting).

It is estimated that approximately 30 new HIV cases were diagnosed in IDUs in 2001. The annual number of diagnosed HIV cases in IDUs generally decreased during the period from 1990-1999, then during the past 2 years the number of diagnosed cases has remained essentially unchanged.

Behavioral survey (HITS II) findings indicate the presence of behaviors associated with HIV transmission, such as multiple sexual partners, inconsistent condom use, and non-injectable drug use in the populations of Missouri IDUs surveyed¹⁰ (It should be remembered that some HIV-infected IDUs likely became infected through sexual contact rather than sharing of syringes/drug paraphernalia.) The presence of such risky behaviors, coupled with the fact that, according to a recent estimate, there are almost 12,000 IDUs currently living in Missouri¹³, point to the ongoing need for prevention efforts (directed to both drug-using and sexual behaviors) in IDU populations.

Men Who Have Sex With Men and Inject Drugs (MSM/IDU)

It is estimated that 282 (6.3%) of the 4,487 reported adult/adolescent HIV cases, and 802 (8.9%) of the 9,051 reported adult/adolescent AIDS cases, are MSM/IDUs. It is estimated that approximately 15 new HIV cases were diagnosed in MSM/IDUs in 2001.

HIV infection is a problem among both white and black MSM/IDUs; more cases have been reported from white MSM/IDUs, but black MSM/IDUs are likely experiencing higher rates of infection. Of total reported HIV cases in MSM/IDUs, 64.5% were in white men, 32.8% were in black men, and 1.5% were in Hispanic men.

Most MSM/IDUs who become infected with HIV likely do so while in their twenties or thirties.

The majority of HIV-infected MSM/IDUs are from either the St. Louis or Kansas City metropolitan areas. Of total reported HIV cases in MSM/IDUs, 57.7% were in men living in either St. Louis City, St. Louis County, or Kansas City at the time of diagnosis; in addition, 53.8% of white MSM/IDU HIV cases and 70.1% of black MSM/IDU cases were from one of these three locations.

It is estimated that approximately 20 new HIV cases were diagnosed in MSM/IDUs in 2001. The annual number of diagnosed HIV cases in MSM/IDUs generally decreased during the period from 1990-2000, but then apparently increased by approximately 10 cases from 2000-2001. The overall decrease in the annual number of diagnosed cases from 1990-2000 occurred in both white and black MSM/IDUs, but the increase in cases from 2000-2001 occurred only in white men.

A recent CDC report on MSM/IDUs pointed out that because these individuals have multiple risks for HIV infection, they are particularly vulnerable to infection and can transmit HIV across multiple populations, including MSM, IDU, and heterosexual women. Prevention strategies must provide the information, skills, and support necessary to reduce both sexual and drug-related risk behaviors among MSM/IDUs, and include access to drug treatment and to prevention case management.¹⁴

Additional Comments

Substance Abuse, Including Non-Injecting Drug Use

CDC has stated that substance abuse is fueling the sexual spread of HIV in the U.S., especially in minority communities with high rates of STDs.¹⁵ Sharing of syringes and other drug paraphernalia is a well known route of HIV transmission, yet injection drug use contributes to the HIV epidemic's spread far beyond the circle of those who inject. People who have sex with an IDU also are at risk for infection through the sexual transmission of HIV. Children born to mothers who contracted HIV through sharing needles or having sex with an IDU may become infected as well. Noninjection drugs (such as "crack" cocaine or methamphetamines) also contribute to the spread of the epidemic when users trade sex for drugs or money, or when they engage in risky sexual behaviors that they might not engage in when sober. One CDC study of more than 2,000 young adults in three inner-city neighborhoods found that crack smokers were three times more likely to be infected with HIV than non-smokers. Effective substance abuse treatment that helps people stop using drugs not only eliminates the risk of HIV transmission from sharing contaminated syringes, but, for many, reduces the risk of engaging in risky behaviors that might result in sexual transmission.¹⁶

Civilian Applicants for Military Service

Civilian applicants for military service are routinely tested for HIV infection, and the results of this testing provide information on trends in HIV Disease within this particular population of young people. Among the 134,364 Missouri military service applicants tested for HIV during the period from 1986 through 1999, only a very small percentage (0.06%) have tested positive.

The HIV seropositivity rate was higher in males than in females (0.07% vs 0.04%), and in blacks compared to whites (0.21% vs 0.04%). The highest seropositivity rate was in black males (0.25%), followed by black females (0.08%), white males (0.04%), and white females (0.03%).

The overall seropositivity rate for Missouri civilian applicants for military service has, in general, been decreasing since 1987. The seropositivity rate in blacks has fluctuated during this period, but has decreased during each of the past 3 years. The white seropositivity rate has been very low in recent years without noticeable upward or downward trends.

Other Sexually Transmitted Diseases in Missouri - 2001 General Summary and Comments

Sexually transmitted diseases [STDs] such as gonorrhea, chlamydia, and syphilis are important public health problems in Missouri. Each of these diseases has the potential to cause very serious long-term consequences in infected persons. In addition, the presence of any of these diseases makes HIV transmission from an HIV-infected person to his/her non-HIV-infected sexual partner 2-5 times more likely to occur. More specifically, biological factors make people who are infected with an STD more likely to become infected with HIV if exposed sexually; and HIV-infected people with an STD are more likely to transmit HIV to their sex partners. It follows that an essential component of HIV prevention consists of efforts to decrease the occurrence of STDs.¹⁷

HIV Disease Epi Profile Summary: Missouri

Gonorrhea

Large numbers of Missourians are infected with *Neisseria gonorrhoeae* each year; 8,723 gonorrhea cases were reported in the state in 2001, and many additional persons were undoubtedly infected but not diagnosed and reported. Blacks continue to be very disproportionately affected. In 2001, 6,562 gonorrhea cases were reported in blacks compared to 1,098 cases in whites, and the rate of reported black cases was 46 times the rate for whites. For both blacks and whites, the largest numbers of cases are reported from persons in their late teens and early twenties; among females, the late teens is the age group with the most reported cases, whereas among males, the largest numbers of cases are in the 20-24 age group. In 2001, the largest numbers of gonorrhea cases, and the highest rates, were reported from St. Louis City, followed by Kansas City, St. Louis County, and Outstate Missouri. Cases were reported from 90 (78.9%) of Missouri's 114 counties (and from St. Louis City). The annual number of reported gonorrhea cases in Missouri decreased each year from 1989 to 1997; since that time, no sustained upward or downward trends have been seen. The 8,723 cases reported in 2001 represented a 1.8% decrease from the 8,883 cases reported the preceding year. From 2000 to 2001, increases in reported cases were seen in St. Louis City (+10.6%) and St. Louis County (+6.3%); decreases were seen in Kansas City (20.6%) and Outstate Missouri (-3.0%). In 2000 (the last year for which national data are available), Missouri ranked 14th among the 50 states in rates of reported gonorrhea cases; in addition, St. Louis ranked 4th and Kansas City 8th among U.S. cities of >200,000 population in reported rates of gonorrhea cases.¹⁸

Comment:

Most gonococcal infections among men produce symptoms that cause them to seek curative treatment soon enough to prevent serious sequelae, but this may not be soon enough to prevent transmission to others. Among women, many infections with *N. gonorrhoeae* do not produce recognizable symptoms until complications (e.g., pelvic inflammatory disease, or PID) have occurred. If not adequately treated, 10% to 40% of women infected with gonorrhea develop PID. Among women with PID, tubal scarring will cause involuntary infertility in 20%, ectopic pregnancy in 9%, and chronic pelvic pain in 18%. Both symptomatic and asymptomatic cases of PID can result in tubal scarring that can lead to these other complications.^{9,18}

In Missouri, as well as nationwide, the largest burden of infection is in blacks, among teenagers and young adults, and in urban areas. However, gonococcal infections, although on a smaller scale, are also occurring in other groups of persons and in non-urban areas. The rate for gonorrhea cases reported in 2001, 159.5 per 100,000 persons, is well above the the Healthy People 2010 (HP2010) national objective of 19 cases per 100,000 persons.¹⁹

The fact that large numbers of new infections are taking place each year in Missouri is an ongoing cause for concern, especially because of the potential sequelae (especially in women) that can result, and because the presence of an inflammatory STD such as gonorrhea can facilitate the transmission of HIV. In addition, the occurrence of large numbers of gonococcal infections reflects the substantial prevalence of unsafe sexual practices which can (and do) transmit other STDs (including HIV) in addition to *N. gonorrhea*.

Prevention of new gonococcal infections should be an important priority, and can include efforts to provide education and promote behavior change among high-risk and potentially high-risk groups. In addition, medical providers should be encouraged and assisted to properly diagnose and treat gonorrhea in their patients (new guidelines⁹ for managing patients with gonorrhea were published by CDC in May 2002, and are available at <http://www.cdc.gov/std/treatment/default.htm>). Because gonococcal infections among women often are asymptomatic, an important component of gonorrhea control continues to be the screening of women at high risk for STDs.⁹

Chlamydia

Large numbers of Missourians are infected with *Chlamydia trachomatis* each year; 13,949 chlamydia cases were reported in the state in 2001, and many additional persons were undoubtedly infected but not diagnosed and reported. Because of incomplete information, the race of about one-fifth of reported cases is not known. However, based on available data, it is evident that blacks are disproportionately affected by chlamydia, although not to the extent seen with syphilis and gonorrhea. For all racial groups, the largest numbers of cases are reported from persons in their late teens and early twenties; among females, the late teens is the age group with the most reported cases. In 2001, the largest numbers of chlamydia cases were reported from Outstate Missouri, followed by St. Louis City, St. Louis County, and Kansas City. However, the highest case rates were in St. Louis City, followed by Kansas City, St. Louis County, and Outstate Missouri. Only 2 Missouri counties did not report a chlamydia case in 2001. The annual number of reported chlamydia cases increased dramatically from 1985 through 1990, reflecting a marked increase in chlamydia testing during this period. Since 1990, the number of cases reported each year has, in general, continued to increase although at a much slower rate. The 13,949 cases reported in 2001 represented a 3.7% increase from the 13,450 cases reported the preceding year. From 2000 to 2001, increases in reported cases were seen in St. Louis City (+17.8%), St. Louis County (+2.8%), and Outstate Missouri (+6.0%); a decrease was seen in Kansas City (-14.0%). In 2000 (the last year for which national data are available), Missouri ranked 24th among the 50 states in rates of reported chlamydia cases; in addition, St. Louis ranked 6th and Kansas City 10th among U.S. cities of >200,000 population in reported rates of chlamydia cases.¹⁸

Comment:

Chlamydial infection is the most common bacterial STD in the United States today, and occurs frequently among sexually active adolescents and young adults. According to CDC, the infection is so common in young women that, by age 30, 50% of sexually active women have evidence that they have had chlamydia at some time during their lives.²⁰

Chlamydia is a major cause of pelvic inflammatory disease, or PID. If not adequately treated, 20% to 40% of women infected with chlamydia develop PID. Among women with PID, tubal scarring will cause involuntary infertility in 20%, ectopic pregnancy in 9%, and chronic pelvic pain in 18%. Asymptomatic infection is common among both men and women (in women, approximately 70% of chlamydia infections are asymptomatic). Adolescent women may have a physiologically increased susceptibility to chlamydia **infection due to increased cervical ectopy⁸.**

Women made up about 85% of reported chlamydia cases in Missouri in 2001, but this likely reflects the greater number of women screened for this disease, and the fact that many of the male sex partners of women with chlamydia are not diagnosed or reported. The largest burden of infection is among teenagers and young adults, and in urban areas. As with other STDs, blacks are disproportionately represented, although less so than with gonorrhea and syphilis. Chlamydia appears more widely distributed in the community than either syphilis or gonorrhea, and large numbers of cases occur in whites as well as in blacks. The slow but consistent increase in the annual number of reported cases in Missouri in recent years may, at least in part, reflect the expansion of chlamydia screening activities and the use of increasingly sensitive diagnostic tests.

The fact that large numbers of *C. trachomatis* infections are continuing to occur in Missouri, the insidious nature of the infection, and its potentially severe consequences (especially in women) are all reasons for concern. Another concern is that the presence of an inflammatory STD such as chlamydia can facilitate the transmission of HIV. In addition, the occurrence of large numbers of chlamydial infections reflects the substantial prevalence of unsafe sexual practices which can (and do) transmit other STDs (including HIV) in addition to *C. trachomatis*.

HIV Disease Epi Profile Summary: Missouri

Because chlamydial infection frequently occurs without symptoms, the disease is often not diagnosed—or, in some instances, not diagnosed until complications develop. Consequently, screening of persons at increased risk for *C. trachomatis* infection, such as young, sexually active women, is very important in finding infected persons so that they can be treated and further spread of infection halted, and so that the extent of the infection can be determined. The numbers of chlamydia cases reported, and their distribution, significantly depend on where and in what populations screening is taking place. In this regard, the Missouri Infertility Prevention Project (MIPP) has been important in making chlamydia screening available to large numbers of young women throughout the state. This results in many additional infected individuals being detected, thus providing a more representative picture of chlamydia in Missouri. However, many women who are at risk for this infection are still not being tested, reflecting the lack of awareness among some health care providers and the limited resources available to support screening. Chlamydia screening and reporting are likely to expand further in response to the recently implemented Health Plan Employer Data and Information Set (HEDIS) measure for chlamydia screening of sexually active women 15 through 25 years of age who are provided medical care through managed care organizations.¹⁸

In parts of the United States where large scale chlamydia screening programs have been instituted, prevalence of the disease has declined substantially.¹⁸ There is also evidence that screening and treatment of chlamydial cervical infection can reduce the likelihood of PID. The 2000 STD treatment guidelines from CDC state that “sexually active adolescent women should be screened for chlamydial infection at least annually, even if symptoms are not present. Annual screening of all sexually active women aged 20–25 years is also recommended, as is screening of older women with risk factors (e.g., those who have a new sex partner and those with multiple sex partners). An appropriate sexual risk assessment should always be conducted and may indicate more frequent screening for some women.”⁹

Prevention of new chlamydial infections should be an important priority and, besides screening of high risk women, can include efforts to provide education and promote behavior change among high-risk and potentially high-risk groups. In addition, medical providers should be encouraged and assisted to properly diagnose and treat chlamydia in their patients (the new guidelines⁹ for managing patients with chlamydia, published by CDC in May 2002, are available at <http://www.cdc.gov/std/treatment/default.htm>).

Syphilis

Primary and Secondary Syphilis

The annual number of reported cases of primary and secondary (P&S) syphilis has been decreasing since 1993. The 26 cases of P&S syphilis reported in Missouri in 2001 represented a 10.3% decrease from the 29 cases reported the preceding year. (An additional 33 cases of early latent syphilis [duration of less than 1 year] were reported during 2001, a 36.5% decrease from the 52 cases reported in 2000.) Blacks continue to be very disproportionately affected by syphilis, with few P&S syphilis cases being reported in whites (only 5 cases in 2001). The average age at time of diagnosis is higher for reported cases of P&S syphilis as compared to reported cases of chlamydia or gonorrhea, and a noticeable proportion of cases are seen in persons greater than 35 years of age. In 2001, 15 (57.7%) of the 26 reported P&S syphilis cases were from St. Louis City, followed by 5 (19.2%) cases from Kansas City, 4 (15.4%) cases from the Outstate area, and 1 (3.8%) case from St. Louis County. The highest rates of reported P&S syphilis cases were in St. Louis City; much lower rates were seen in Kansas City, St. Louis County, and the Outstate area. Only 6 of the state's 114 counties (and St. Louis City) reported P&S syphilis cases in 2001. In 2000 (the last year for which national data are available), Missouri ranked 29th among the 50 states in rates of reported P&S syphilis cases; in addition, St. Louis ranked 26th and Kansas City 59th among U.S. cities of >200,000 population in reported rates of P&S cases.¹⁸

HIV Disease Epi Profile Summary: Missouri

Congenital Syphilis

In 2001, 5 cases of congenital syphilis were reported in Missouri, the same number as the preceding year. All of the 2001 cases were in black infants, and all were from either St. Louis City (4 cases) or St. Louis County (1 case).

Comment:

The clear majority of syphilis cases continue to occur in the St. Louis area (especially St. Louis City). The largest burden of infection is clearly in blacks. In contrast to chlamydia and gonorrhea, cases of P&S syphilis are more likely to be seen in persons in their later 30's and older. The numbers of reported cases of P&S syphilis in Missouri are small in comparison to other STDs such as gonorrhea and chlamydia. However, because of the severe disease that can result from untreated syphilis infection, because the presence of an ulcerative STD such as syphilis can facilitate the transmission of HIV, and because of the significant resources that must be devoted to the investigation and follow-up of even a single syphilis case, the control and (hopefully) eventual elimination of this infection remains an important priority. Also, although the number of cases reported in 2001 was small, the potential still remains for the recurrence of significant outbreaks of syphilis in the state.

Prevention of new syphilis infections can include efforts to provide education and promote behavior change among high-risk and potentially high-risk groups. In addition, medical providers should be encouraged and assisted to properly diagnose and treat syphilis in their patients (new guidelines⁹ for managing patients with syphilis were published by CDC in May 2002, and are available at <http://www.cdc.gov/std/treatment/default.htm>).

A significant risk factor associated with many of the congenital syphilis cases that have been reported in recent years is lack of, or inadequate, prenatal care by the mother. Appropriate prenatal care, involving syphilis testing, is vital to detecting and treating infection in pregnant women so that congenital syphilis in the infant can be prevented. It is also important to remember that by minimizing the number of new syphilis cases which occur in young adults, the actual risk of congenital syphilis in the community can be reduced.

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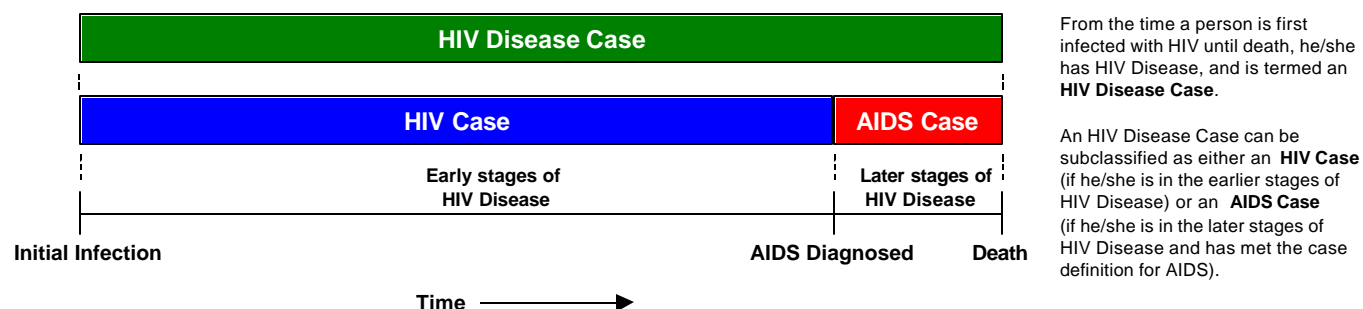
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Introductory Comments

Figure 1. Relationship of HIV Disease Cases, HIV Cases, and AIDS Cases



- As indicated in Figure 1, each HIV-infected person is an **HIV Disease Case** and, given the lifelong nature of HIV infection, remains an HIV Disease Case for the remainder of his/her life.
- Each HIV Disease Case can be subclassified as either an **HIV Case** or an **AIDS case** (i.e., he/she cannot be both an HIV case and an AIDS case at the same time). Once a person progresses to the later stages of the disease and is diagnosed as an **AIDS case** (by meeting the CDC surveillance case definition), he/she will remain an AIDS case. This is true even if he/she met the AIDS case definition because of a CD4+ lymphocyte count <200 cells/mm³, and later (perhaps as a result of effective antiretroviral therapy) has a CD4+ count >200 cells/mm³.
- **HIV cases** generally represent persons who, in comparison to AIDS cases, were infected more recently. Thus the characteristics of reported HIV cases (e.g., race, gender, exposure category) would be expected to more closely represent the characteristics of persons who are currently at highest risk of being infected.
- **AIDS cases** represent persons in the later stages of HIV disease who are at risk for developing serious, potentially fatal, opportunistic diseases. Consequently, AIDS cases, as compared to HIV cases, are individuals who are likely to have relatively greater needs for medical and social services, as well as for service coordination assistance.

Trends in newly diagnosed AIDS cases (AIDS incidence) reflect, in part, the effects of antiretroviral treatment, since effective treatment given to infected persons while they are still HIV cases will slow the disease process, and consequently slow the progression to AIDS.

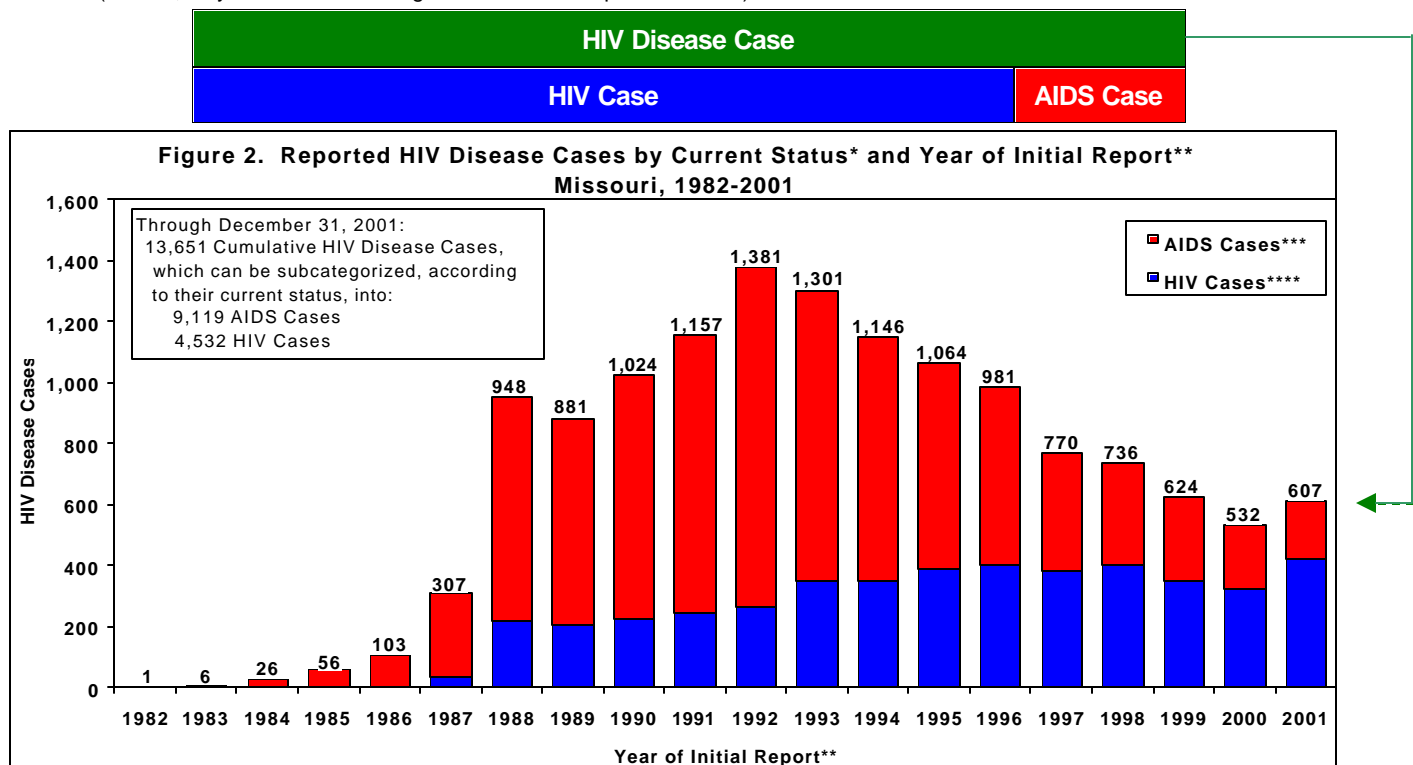
- In order to understand the epidemiology of HIV disease in Missouri (i.e., who is being infected, where are these persons located, what are the trends over time), it is necessary to examine not only HIV Disease Cases, but also the subcategories of HIV Cases and AIDS Cases.

HIV Disease Epi Profile Summary: Missouri

Magnitude and Impact of the Problem

- From 1982 through 2001, a total of 13,651 HIV Disease cases have been reported in Missouri residents; 5,035 (36.9%) of these persons are known to have died. In 2001, 607 new HIV Disease cases were reported for the first time to public health officials. Figure 2 shows reported HIV Disease cases by current status (HIV case vs. AIDS case) and year of initial report (i.e., the year in which the first report of the person, whether as an HIV case or an AIDS case, was received). (See also the section entitled “Trends” on pages 26 and 27.)
- Of these 13,651 HIV Disease cases, 9,119 (66.8%) have met the case definition for AIDS and are thus categorized as AIDS cases; 4,532 (53.3%) of the 9,119 reported AIDS cases are known to have died, and 4,262 (46.7%) are living (see Figure 3).
- During 2001, 150 HIV-related deaths in Missouri residents were reported on death certificates; in 2000, 169 HIV-related deaths were reported. Figure 4 shows HIV-related deaths by race/ethnicity and year of report for the period from 1990-2001 (see also the section entitled “Trends” on pages 26 and 27).
- In 2001, 370 new AIDS cases were reported. (Note that many of these persons had already, in previous years, been reported as HIV cases. However, during 2001, new reports were received indicating that they now met the case definition for AIDS, and thus they were reclassified as AIDS cases with 2001 as the date of report.) Figure 5 (page 18) shows persons (living and deceased) diagnosed with AIDS by year of report (see also the section entitled “Trends” on page 26 and 27).
- The rate of reported AIDS cases in Missouri has been noticeably less than the overall rate nationwide. In 2000 (the most recent year for which national data are available), the AIDS rate per 100,000 population in Missouri was 8.2, compared to the U.S. rate of 14.4.
- Of the 13,651 reported HIV Disease cases, 4,532 (33.2%) have not met the case definition for AIDS, and are thus categorized as HIV cases (see Figure 3); 422 new HIV cases* were reported in 2001.
- It is estimated that there are currently 9,500 to 13,500 HIV-infected persons (i.e., persons with HIV Disease) living in Missouri.

*Throughout this document, whenever reference is made to HIV cases reported in 2001, this means HIV cases reported during that year which remained HIV cases at the end of the year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included (instead, they are included among the AIDS cases reported in 2001).



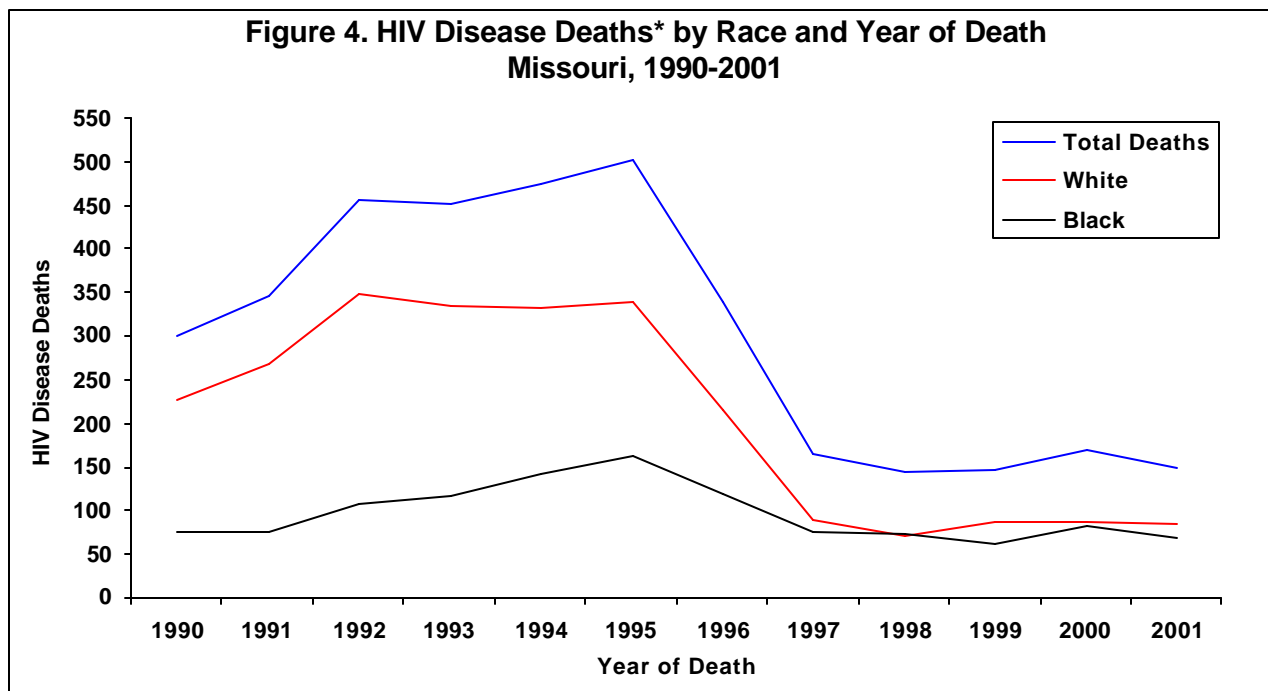
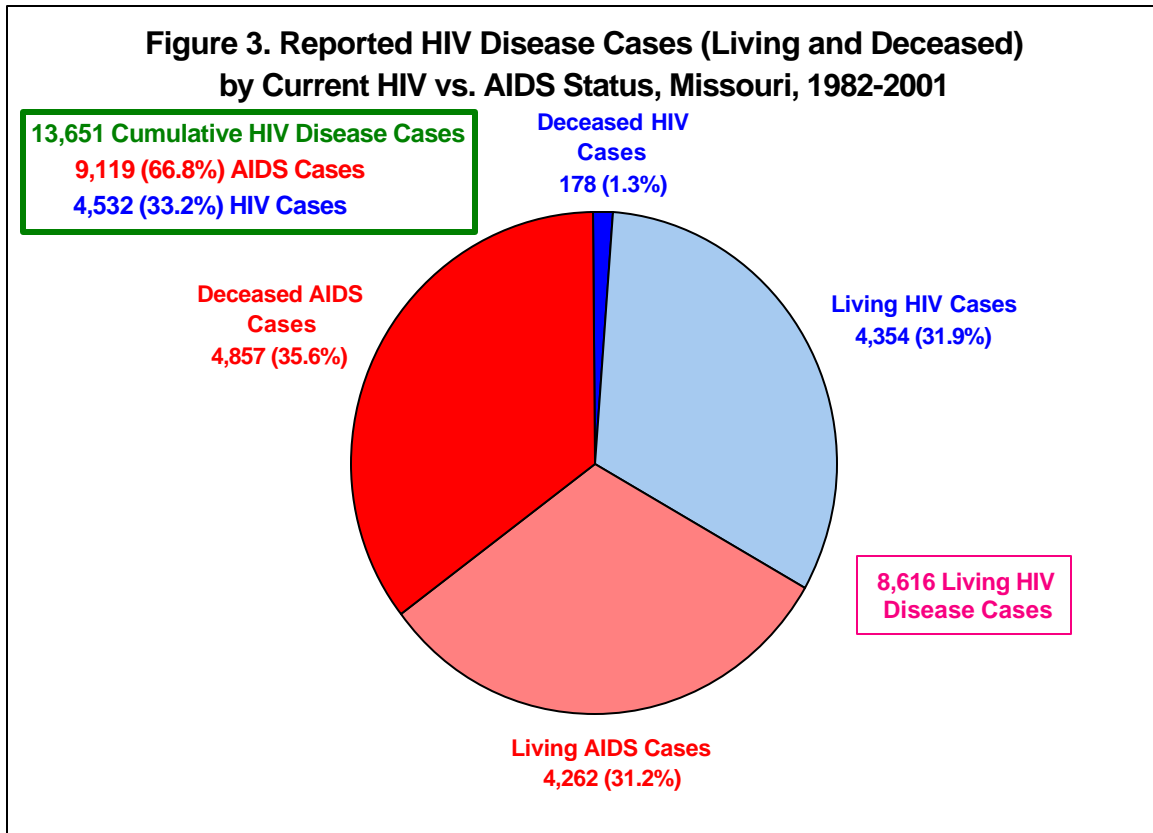
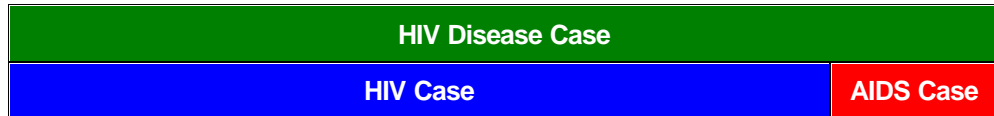
* HIV Case vs. AIDS Case

**Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)

*** These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition: or 2) initially reported as an AIDS case.

**** These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

HIV Disease Epi Profile Summary: Missouri

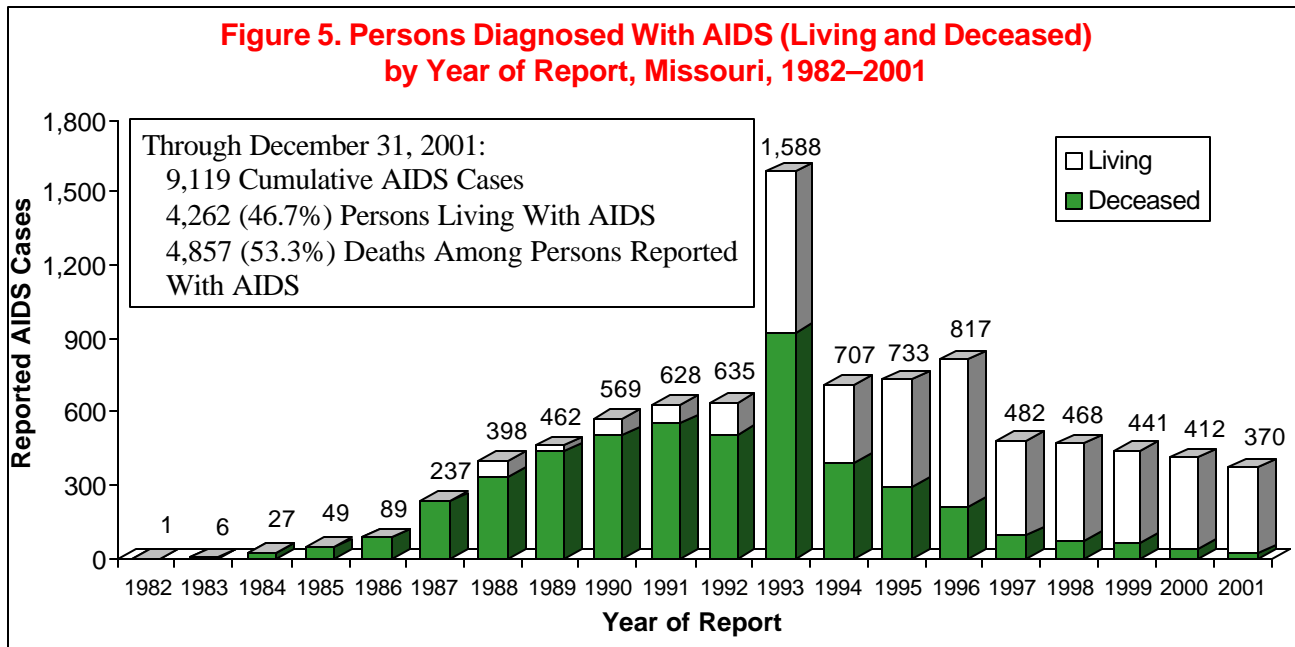


* Based on death certificate data.

HIV Disease Epi Profile Summary: Missouri



Figure 5. Persons Diagnosed With AIDS (Living and Deceased) by Year of Report, Missouri, 1982–2001



Who (1)

- Table 1 describes HIV and AIDS cases by gender, race/ethnicity, and age at diagnosis.
- Males comprised 77.3% of the 422 HIV cases and 81.4% of the 370 AIDS cases reported in 2001.
- Blacks are disproportionately represented among reported HIV and AIDS cases. Although blacks make up only about 11% of Missouri's population, they accounted for 47.9% of HIV cases and 53.2% of AIDS cases reported in 2001. (See Figure 6, which shows total reported HIV and AIDS cases by race/ethnicity and gender.) The rate for HIV cases reported in 2001 in blacks (33.1) was 7.7 times the rate in whites (4.3). (See Table 9 on page 25.) Also, 45.3% of AIDS-related deaths in 2001 were in blacks.
- The over-representation of blacks is especially seen in reported HIV and AIDS cases in females. Of the 96 female HIV cases reported in 2001, 63 (65.6%) were in black females. Of the 69 female AIDS cases reported in 2001, 49 (71.0%) were in black females.
- For Hispanics, the rates for HIV and AIDS cases reported in 2001 were about 2.5 times those seen in whites. However, the numbers of reported Hispanic cases (10 HIV cases and 8 AIDS cases in 2001) have been small.
- Asians and American Indians each comprise less than 0.5% of total reported HIV and AIDS cases. In 2001, 1 HIV case was reported in an Asian; and no HIV cases were reported in American Indians. Five AIDS cases were reported in Asians and no AIDS cases were reported in American Indians in 2001.
- Of the 422 HIV cases reported in 2001, 35.3% were diagnosed in 30-39 year olds, 28.7% in 20-29 year olds, 22.7% in 40-49 year olds, 8.1% in persons 50 years of age and older, and 4.3% in 13-19 year olds. These data indicate that many infections are occurring in persons in their twenties, and that infections are certainly occurring in teenagers. (It should be noted that initial infection with HIV can occur several years before the person is tested and diagnosed.)
- Among reported HIV cases in white males, the largest number were diagnosed in men 30-34 years of age; for reported cases in black males, the largest number were diagnosed in men 25-29 years of age. Among HIV cases reported in white females, the largest number were diagnosed in women 20-24 and 25-29 years of age (63 cases were diagnosed in each of these age groups); for reported cases in black females, the largest number were diagnosed in women 30-34 years of age. Figure 7 shows total reported adult/adolescent HIV cases in white males and females, and black males and females, by age group.

HIV Disease Epi Profile Summary: Missouri

HIV Disease Case

HIV Case

AIDS Case

Table 1. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Age at Diagnosis, Missouri, 1982–2001

	HIV Cases				AIDS Cases				HIV Disease	
	Reported 2001*	%	Cumulative	%	Reported 2001	%	Cumulative	%	Cumulative	%
Gender										
Male	326	(77.3%)	3,756	(82.9%)	301	(81.4%)	8,225	(90.2%)	11,981	(87.8%)
Female	96	(22.7%)	776	(17.1%)	69	(18.6%)	894	(9.8%)	1,670	(12.2%)
Race/Ethnicity										
White	201	(47.6%)	2,445	(53.9%)	160	(43.2%)	5,914	(64.9%)	8,359	(61.2%)
Black	202	(47.9%)	1,935	(42.7%)	197	(53.2%)	2,966	(32.5%)	4,901	(35.9%)
Hispanic	10	(2.4%)	104	(2.3%)	8	(2.2%)	182	(2.0%)	286	(2.1%)
Asian/Pacific Islander	1	(0.2%)	14	(0.3%)	5	(1.4%)	25	(0.3%)	39	(0.3%)
American Indian	0	(0.0%)	13	(0.3%)	0	(0.0%)	32	(0.4%)	45	(0.3%)
Unknown	8	(1.9%)	21	(0.5%)	0	(0.0%)	0	(0.0%)	21	(0.2%)
Race/Ethnicity and Gender										
White Male	173	(41.0%)	2,152	(47.5%)	142	(38.4%)	5,535	(60.7%)	7,687	(56.3%)
Black Male	139	(32.9%)	1,475	(32.5%)	148	(40.0%)	2,470	(27.1%)	3,945	(28.9%)
Hispanic Male	7	(1.7%)	90	(2.0%)	6	(1.6%)	169	(1.9%)	259	(1.9%)
Asian/Pacific Islander Male	1	(0.2%)	10	(0.2%)	5	(1.4%)	22	(0.2%)	32	(0.2%)
American Indian Male	0	(0.0%)	12	(0.3%)	0	(0.0%)	29	(0.3%)	41	(0.3%)
Unknown Male	6	(1.4%)	17	(0.4%)	0	(0.0%)	0	(0.0%)	17	(0.2%)
White Female	28	(6.6%)	293	(6.5%)	18	(4.9%)	379	(4.2%)	672	(4.9%)
Black Female	63	(14.9%)	460	(10.2%)	49	(13.2%)	496	(5.4%)	956	(7.0%)
Hispanic Female	3	(0.7%)	14	(0.3%)	2	(0.5%)	13	(0.1%)	27	(0.2%)
Asian/Pacific Islander Female	0	(0.0%)	4	(0.1%)	0	(0.0%)	3	(0.0%)	7	(0.1%)
American Indian Female	0	(0.0%)	1	(0.0%)	0	(0.0%)	3	(0.0%)	4	(0.0%)
Unknown Female	2	(0.5%)	4	(0.1%)	0	(0.0%)	0	(0.0%)	4	(0.0%)
Age at Diagnosis[‡]										
<13	4	(0.9%)	45	(1.0%)	1	(0.3%)	57	(0.6%)		
13-19	18	(4.3%)	210	(4.6%)	4	(1.1%)	96	(1.1%)		
20-29	121	(28.7%)	1,699	(37.5%)	55	(14.9%)	2,028	(22.2%)		
30-39	149	(35.3%)	1,720	(38.0%)	156	(42.2%)	4,157	(45.6%)		
40-49	96	(22.7%)	663	(14.6%)	107	(28.9%)	1,977	(21.7%)		
50+	34	(8.1%)	195	(4.3%)	47	(12.7%)	804	(8.8%)		
Missouri Total	422 (100.0%)		4,532 (100.0%)		370 (100.0%)		9,119 (100.0%)		13,651 (100.0%)	

* HIV Cases reported during 2001 which remained HIV cases at the end of that year.

[‡] For HIV Cases, Age at Diagnosis is the age at which the individual was first diagnosed with HIV infection.

For AIDS Cases, Age at Diagnosis is the age at which the individual was first diagnosed with AIDS.

Reported HIV Cases by Race/Ethnicity and (for Whites and Blacks) Gender, Missouri, 1985–2001 (n=4,532)

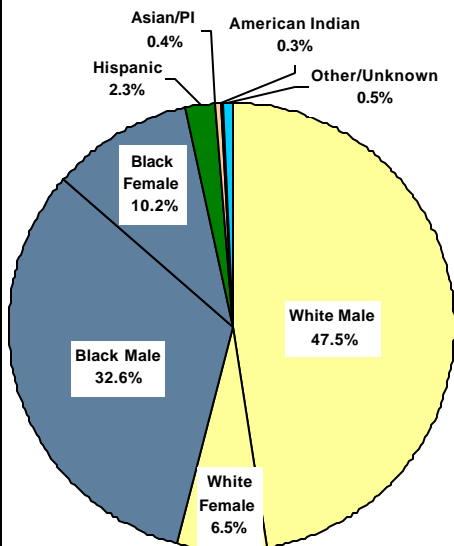
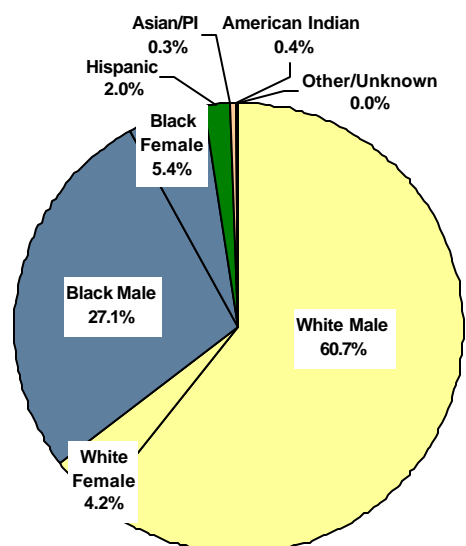
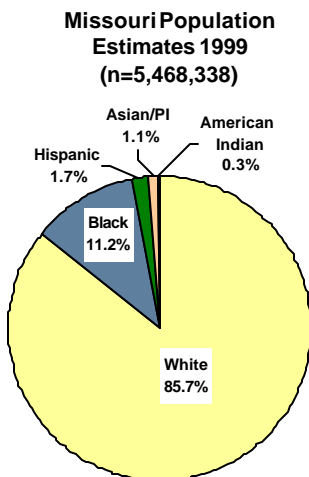


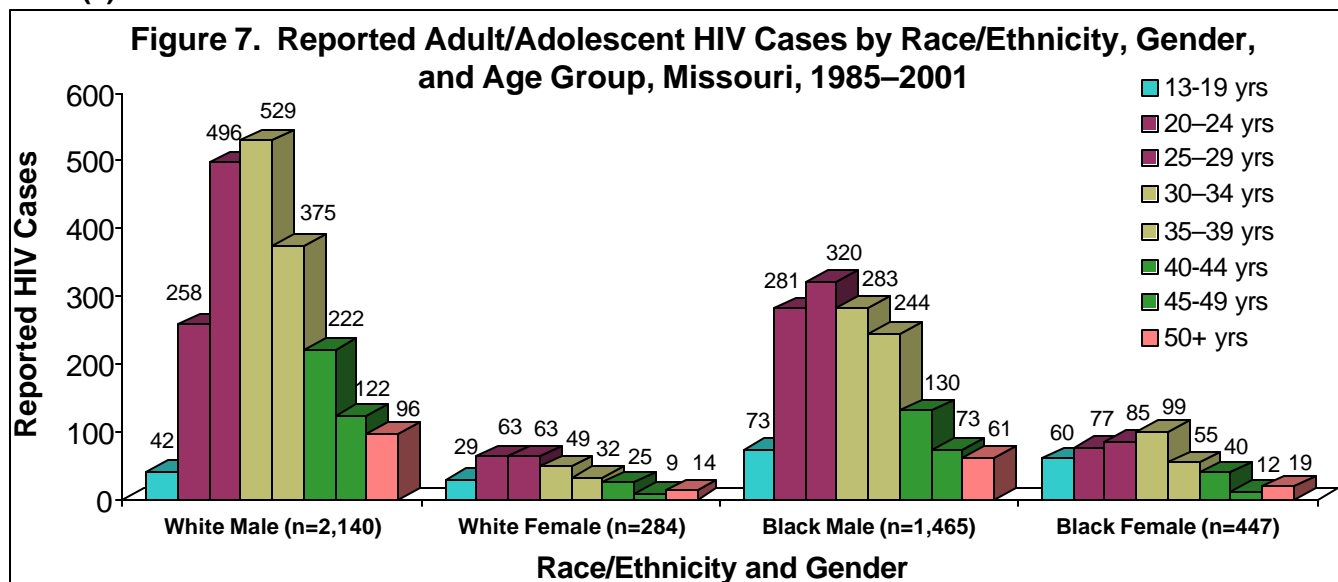
Figure 6

Reported AIDS Cases by Race/Ethnicity and (for Whites and Blacks) Gender, Missouri, 1982–2001 (n=9,119)



HIV Disease Epi Profile Summary: Missouri

Who (1)



- Of the 418 adult/adolescent HIV cases reported in 2001: 166 (39.7%) were in men who have sex with men (MSM); 10 (2.4%) in men who have sex with men and inject drugs (MSM/IDUs); 18 (4.3%) in injecting drug users (IDUs); 78 (18.7%) in heterosexual contacts; 1 (0.2%) in a hemophiliac; 2 (0.5%) in transfusion/transplant recipients; and 143 (34.2%) are still being investigated and have not yet been placed in a specific exposure category.
- Of the 368 adult/adolescent AIDS cases reported in 2001: 194 (52.7%) were in MSM; 17 (4.6%) in MSM/IDUs; 37 (10.1%) in IDUs; 68 (18.5%) in heterosexual contacts; 1 (0.3%) in a hemophiliac; 3 (0.8%) in transfusion/transplant recipients; and 48 (13.0%) are still being investigated and have not yet been placed in a specific exposure category.
- Table 2 shows HIV and AIDS cases by adjusted exposure category. In this table, those cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, heterosexual contact) in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of these cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation.

**Table 2. HIV and AIDS Cases by Adjusted Exposure Category*, Missouri
Reported 2001 and Cumulative Through December 2001**

Exposure Category	HIV Cases				AIDS Cases			
	Reported 2001**		Cumulative		Reported 2001		Cumulative	
	Case	%	Case	%	Case	%	Case	%
Adult/Adolescent								
Men Who Have Sex With Men	246	(58.9%)	2,862	(63.8%)	221	(60.1%)	6,454	(71.3%)
Men Who Have Sex With Men & Inject Drugs	15	(3.6%)	282	(6.3%)	20	(5.4%)	802	(8.9%)
Injecting Drug Use	26	(6.2%)	418	(9.3%)	39	(10.6%)	703	(7.8%)
Heterosexual Contact	128	(30.6%)	880	(19.6%)	84	(22.8%)	846	(9.3%)
Hemophilia/Coagulation Disorder	1	(0.2%)	30	(0.7%)	1	(0.3%)	145	(1.6%)
Blood Transfusion or Tissue Recipient	2	(0.5%)	15	(0.3%)	3	(0.8%)	101	(1.1%)
Risk Not Specified	--	---	--	---	--	---	--	---
Adult/Adolescent Subtotal	418	(100.0%)	4,487	(100.0%)	368	(100.0%)	9,051	(100.0%)
Pediatric Subtotal	4		45		2		68	
Total	422		4,532		370		9,119	

* Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

- A total of 37 perinatal HIV cases and 46 perinatal AIDS cases have been reported; in 2001, 3 perinatal HIV cases and 1 perinatal AIDS case were reported. (Perinatal cases are the result of HIV transmission from an infected mother to her infant before or at the time of birth, or through breast feeding.)

HIV Disease Epi Profile Summary: Missouri

Who (2)

• HIV-Exposed Infants (Infants born to HIV-infected mothers)

- The Missouri Department of Health and Senior Services has knowledge of 334 infants born between 1993-2001 to mothers who were infected with HIV and who were Missouri residents at the time of the birth. Of these 334 infants (termed HIV-exposed infants), 37 (11.1%) were found to be infected with HIV as a result of perinatal (mother-to-infant) transmission; 297 (88.9%) were not infected.
- The proportion of HIV-exposed infants who became infected was noticeably less for those born during the period from 1995-2001 compared to those born during the earlier period from 1993-1994 (6.9% vs. 26.4%). See Table 3. This difference likely reflects the use, starting in mid- to late-1994, of zidovudine (AZT, ZDV) treatment to reduce the risk of perinatal HIV transmission.

Table 3. Known HIV-Exposed Infants* by Infection Status and Year of Birth, Missouri, 1993-2001

Infant's Infection Status	Year of Birth														Total					
	1993		1994		1995		1996		1997		1998		1999			2000		2001		
HIV-Infected Infants	12	28.6%	7	23.3%	2	5.4%	3	7.0%	5	11.6%	3	6.8%	1	2.2%	2	6.9%	2	10.0%	37	11.1%
Non-HIV-Infected Infants	30	71.4%	23	76.7%	35	94.6%	40	93.0%	38	88.4%	41	93.2%	45	97.8%	27	93.1%	18	90.0%	297	88.9%
Total HIV-Exposed Infants*	42	100.0%	30	100.0%	37	100.0%	43	100.0%	43	100.0%	44	100.0%	46	100.0%	29	100.0%	20	100.0%	334	100.0%
*Infants whose mothers were infected with HIV before or during pregnancy, and who were residing in Missouri at the time of birth.																				
NOTE: Column percentages are shown.																				

*Infants whose mothers were infected with HIV before or during pregnancy, and who were residing in Missouri at the time of birth.

NOTE: Column percentages are shown.

- From 1995-2001 (the period in which specific guidelines for the use of AZT to reduce perinatal HIV transmission risk have been in place), 262 HIV-exposed infants are known to have been born to mothers who were Missouri residents at the time of birth. The mothers of 185 (70.6%) of these infants received AZT at some time during the pregnancy; 11 (5.9%) of these 185 infants were infected. By contrast, during the same period the mothers of 77 HIV-exposed infants apparently did not receive AZT during the pregnancy, and 7 (9.1%) of these 77 infants were infected.
- Blacks have been disproportionately represented among HIV-exposed infants. Of the 262 HIV-exposed infants born between 1995-2001:
 - 63 (24.0%) were white
 - 189 (72.1%) were black
 - 6 (2.3%) were Hispanic
 - 4 (1.5%) were of other/unknown race/ethnicity
- White infants, who made up 24.0% of HIV-exposed infants born between 1995-2001, comprised a slightly larger proportion (33.3%) of those infants who were infected. Of the 18 HIV-exposed infants born during this period who were subsequently found to be infected with HIV:
 - 6 (33.3%) were white
 - 12 (66.7%) were black
- The largest number of HIV-exposed infants has been from St. Louis City, followed by Outstate Missouri. Of the 262 HIV-exposed infants born between 1995-2001:
 - 98 (37.4%) were from St. Louis City
 - 41 (15.6%) were from St. Louis County
 - 41 (15.6%) were from Kansas City
 - 82 (31.3%) were from Outstate Missouri
- Of those HIV-exposed infants subsequently found to be infected, the largest number was from Outstate Missouri, followed by St. Louis City. Of the 18 infected infants born between 1995-2001:
 - 7 (38.9%) were from St. Louis City
 - 2 (10.5%) were from St. Louis County
 - 1 (5.6%) was from Kansas City
 - 8 (44.4%) were from Outstate Missouri
- Table 4 shows the time of HIV diagnosis in the mothers of the 262 HIV-exposed infants born between 1995-2001, and the infant's infection status. Only 5.5% of infants whose mothers were diagnosed as HIV- infected before or during pregnancy became infected, compared to 23.1% of infants whose mothers were not diagnosed until after the postpartum period.

Table 4. Known HIV-Exposed Infants* by Infection Status and Time of HIV Diagnosis in the Mother, Missouri, 1995-2001

Infant's Infection Status	Time of HIV Diagnosis in the Mother						Totals
	Before Pregnancy		During Pregnancy		At Delivery or in The Postpartum Period	After The Postpartum Period	
HIV-Infected Infants	8	5.6%	4	4.6%	0	0.0%	18 6.9%
Non-HIV-Infected Infants	134	94.4%	83	95.4%	7	100.0%	244 93.1%
Total HIV-Exposed Infants*	142	100.0%	87	100.0%	7	100.0%	262 100.0%

*Infants whose mothers were infected with HIV before or during pregnancy, and who were residing in Missouri at the time of birth.

NOTE: Column percentages are shown.

HIV Disease Epi Profile Summary: Missouri

Who (3)

• Job Corps Applicants

- From 1988 through 1997 (the latest year that data is available), 17,671 Missouri Job Corps applicants 16-24 years of age were screened for HIV infection: 38 (0.22%, or about 2 per 1,000) were found to be seropositive. The HIV seropositivity rate in African Americans (0.32%) was higher than the corresponding rate in whites (0.11%). When the data are examined by race/ethnicity and gender, the highest seropositivity rate was in African American males (0.34%), followed by African American females (0.29%), and white males (0.15%). Of the 2,208 white females tested from 1988 through 1997, none were found to be HIV seropositive.
- Of the 17,671 Missouri Job Corps applicants screened for HIV infection from 1988 through 1997, 7,643 (43.3%) were St. Louis residents and 4,016 (22.7%) were Kansas City residents. Of the 38 Missouri applicants found to be HIV seropositive during this period, 34 (89.5%) were from either St. Louis (21 persons) or Kansas City (13 persons). The seropositivity rate in the St. Louis applicants was 0.27%, and in the Kansas City applicants 0.32%.
- During the period from 1988 through 1997, in the range of 1,500 to 2,200 Job Corps applicants have been screened each year for HIV infection; the annual number of persons found to be HIV seropositive has ranged from 0 to 8, and the annual seropositivity rate has ranged from 0.0% to 0.46%. In 1997, the most recent year for which data are available, 1,868 applicants were tested and 5 (0.27%) were found to be HIV seropositive.

• Civilian Applicants for Military Service

- From 1986 through 1999, 134,364 civilian applicants for military service* from Missouri have been tested for HIV infection; 85 (0.06%) tested positive. (1999 is the latest year for which data are available.)
- The HIV seropositivity rate was higher in males than in females (0.07% vs 0.04%), and in African Americans compared to whites (0.21% vs 0.04%). When the data are examined by race/ethnicity and gender, the highest seropositivity rate was in African American males (0.25%), followed by African American females (0.08%), white males (0.04%), and white females (0.03%).
- The overall seropositivity rate for Missouri civilian applicants for military service has, in general, been decreasing since 1987. The seropositivity rate in African Americans has fluctuated during this period, but has decreased during each of the past 3 years. The white seropositivity rate has been very low in recent years without noticeable upward or downward trends.
- Table 2 shows the number of military applicants tested, and the number and percent HIV-seropositive, for whites, African Americans, and persons of other/unknown race for the period from 1986 to 1999.

*All persons applying for active duty or reserve military service, the service academies, and the Reserve Officer Training Corps (ROTC).

Table 5. Percent Positive HIV Tests by Race and Year of Test in Missouri Applicants for Military Service*, 1986-1999

	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	Total
Whites															
Tested	13,069	11,098	10,351	10,674	8,282	7,659	6,890	6,673	5,745	5,955	6,290	6,338	5,998	5,970	110,992
Positive	9	12	5	6	1	3	0	2	1	1	1	0	0	1	42
% Positive	0.07%	0.11%	0.05%	0.06%	0.01%	0.04%	0.00%	0.03%	0.02%	0.02%	0.02%	0.00%	0.00%	0.02%	0.04%
Blacks															
Tested	2,341	2,194	2,294	2,344	1,648	1,136	1,036	1,017	1,023	1,095	1,090	1,031	902	1,089	20,240
Positive	6	9	8	2	4	4	0	2	1	1	3	2	1	0	43
% Positive	0.26%	0.41%	0.35%	0.09%	0.24%	0.35%	0.00%	0.20%	0.10%	0.09%	0.28%	0.19%	0.11%	0.00%	0.21%
Other or Unknown															
Tested	246	216	192	250	187	207	220	167	197	211	205	231	265	338	3,132
Positive	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
% Positive	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total															
Tested	15,656	13,508	12,837	13,268	10,117	9,002	8,146	7,857	6,965	7,261	7,585	7,600	7,165	7,397	134,364
Positive	15	21	13	8	5	7	0	4	2	2	4	2	1	1	85
% Positive	0.10%	0.16%	0.10%	0.06%	0.05%	0.08%	0.00%	0.05%	0.03%	0.03%	0.05%	0.03%	0.01%	0.01%	0.06%

*All persons applying for active duty or reserve military service, the service academies, and the Reserve Officer Training Corps (ROTC).

HIV Disease Epi Profile Summary: Missouri

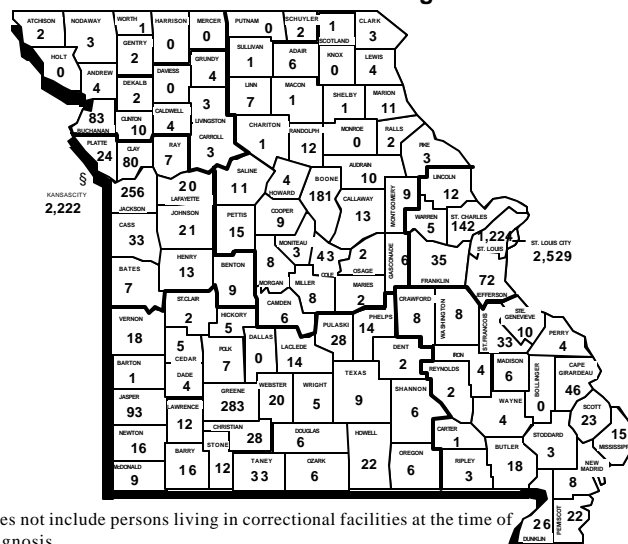
Who (Living HIV Disease Cases)

- At the end of 2001, of the 13,651 HIV Disease cases that had been reported to the Missouri Department of Health and Senior Services since 1982, 5,035 (36.9%) were known to have died and 8,616 (63.1%) were currently living. Table 6 describes these 8,616 living HIV Disease cases by gender and race/ethnicity.
- Figure 8 shows the 8,616 currently living HIV Disease cases by county of residence at the time of diagnosis (which may or may not be the present location of residence).

Table 6. Currently Living HIV-Diagnosed Persons (HIV and AIDS Cases) Who Were Residents of Missouri at the Time of Diagnosis, and Who Were Reported Through 2001, by Gender and Race/Ethnicity

	Living HIV-Diagnosed Persons	%
Gender		
Male	7,336	85.1%
Female	1,280	14.9%
Race/Ethnicity		
White	4,845	56.2%
Black	3,500	40.6%
Hispanic	195	2.3%
Asian/Pacific Islander	27	0.3%
American Indian	28	0.3%
Unknown	21	0.2%
Race/Ethnicity and Gender		
White Male	4,361	50.6%
Black Male	2,739	31.8%
Hispanic Male	172	2.0%
Asian/Pacific Islander Male	20	0.2%
American Indian Male	27	0.3%
Unknown Male	17	0.2%
White Female	484	5.6%
Black Female	761	8.8%
Hispanic Female	23	0.3%
Asian/Pacific Islander Female	7	0.1%
American Indian Female	1	0.0%
Unknown Female	4	0.1%
Total Living HIV-Diagnosed Persons	8,616	100.0%

Figure 8. Currently Living HIV-Diagnosed Persons (HIV and AIDS Cases), Reported Through 2001, by Missouri County of Residence[†] at Time of Diagnosis



[†] Does not include persons living in correctional facilities at the time of diagnosis.

§ All cases within the city limits of Kansas City are included in the totals for Kansas City. Cases indicated in Jackson, Clay and Platte counties are outside the city limits of Kansas City.

- At the end of 2001, 4,065 (living) HIV Disease cases* were enrolled in HIV case management in Missouri. Table 7 describes these individuals by gender and race/ethnicity.

**Table 7. Living HIV-Diagnosed Persons
(HIV and AIDS cases) Enrolled in HIV Case Management as of
December 31, 2001, by Gender and Race/Ethnicity**

	Living HIV-Diagnosed Persons in HIV Case Management	%
Gender		
Male	3,283	80.8%
Female	782	19.2%
Race/Ethnicity		
White	2,194	54.0%
Black	1,674	41.2%
Hispanic	101	2.5%
Asian/Pacific Islander	11	0.3%
American Indian	3	0.1%
Unknown	82	2.0%
Race/Ethnicity and Gender		
White Male	1,913	47.1%
Black Male	1,223	30.1%
Hispanic Male	85	2.1%
Asian/Pacific Islander Male	11	0.3%
American Indian Male	2	0.1%
Unknown Male	49	1.2%
White Female	281	6.9%
Black Female	451	11.1%
Hispanic Female	16	0.4%
Asian/Pacific Islander Female	0	0.0%
American Indian Female	1	0.0%
Unknown Female	33	0.8%
Total Living HIV-Diagnosed Persons	4,065	100.0%
Enrolled in HIV Case Management		

* Note that some of these persons were initially diagnosed and reported with HIV/AIDS in states other than Missouri, but later moved to Missouri where they were then enrolled in case management. As a consequence, these individuals are not included among reported Missouri HIV or AIDS cases, but rather are included among reported cases in the states where they were initially diagnosed and reported.

HIV Disease Epi Profile Summary: Missouri

Where

- Table 8 summarizes reported HIV and AIDS cases and rates by geographic area. The highest rates of HIV and AIDS cases are in St. Louis City, followed by Kansas City, St. Louis County, and Outstate Missouri.
- Of the 422 HIV cases reported in Missouri residents in 2001:
 - 135 (32.0%) were from St. Louis City; the rate was 40.4 cases per 100,000 population
 - 64 (15.2%) were from St. Louis County; the rate was 6.4
 - 89 (21.1%) were from Kansas City; the rate was 20.3
 - 104 (24.6%) were from Outstate Missouri; the rate was 2.8
 - 30 (7.1%) were in persons in Missouri Correctional Facilities at the time of diagnosis
- Of the 370 AIDS cases reported in Missouri residents in 2001:
 - 140 (37.8%) were from St. Louis City; the rate was 41.9 cases per 100,000 population
 - 64 (17.3%) were from St. Louis County; the rate was 6.4
 - 73 (19.7%) were from Kansas City; the rate was 16.7
 - 85 (23.0%) were from Outstate Missouri; the rate was 2.3
 - 8 (2.2%) were in persons in Missouri Correctional Facilities at the time of diagnosis
- Table 9 provides information on 2001 HIV cases and rates by race/ethnicity and geographic area. The largest number of cases were reported from St. Louis City, which also had the highest case rate. The second largest number of cases were reported from the Outstate area, but the case rate here was the lowest for the four geographic areas shown in the table. In each of these geographic areas, the rate in blacks was noticeably higher than in whites.
- Figure 9 shows cumulative reported HIV cases by county; at least 1 HIV case has been reported from 93 (81.6%) of Missouri's 114 counties. Figure 8 shows cumulative reported AIDS cases by county; at least 1 AIDS case has been reported from 105 (92.1%) of the state's 114 counties. Only 5 (4.4%) Missouri counties have no reported HIV or AIDS cases.
- Table 10 provides information on HIV cases and rates by race/ethnicity and HIV Region. The largest number of cases and the highest case rate were reported from the St. Louis Region, followed by the Kansas City Region. (See the section on each HIV region for a detailed description of HIV disease in that region).

Table 8. HIV and AIDS Cases and Rates by Geographic Area, Missouri, Reported 2001 and Cumulative Through December 2001

Geographic Area	HIV Cases					AIDS Cases				
	Reported 2001*			Cumulative		Reported 2001			Cumulative	
	Cases	%	Rate**	Cases	%	Cases	%	Rate**	Cases	%
Location										
St. Louis City [†]	135	32.0%	40.4	1,326	29.3%	140	37.8%	41.9	2,582	28.3%
St. Louis County [†]	64	15.2%	6.4	599	13.2%	64	17.3%	6.4	1,416	15.5%
Kansas City [†]	89	21.1%	20.3	1,131	25.0%	73	19.7%	16.7	2,535	27.8%
Outstate [†]	104	24.6%	2.8	1,154	25.5%	85	23.0%	2.3	2,368	26.0%
Missouri Correctional Facilities ^{††}	30	7.1%	---	322	7.1%	8	2.2%	---	218	2.4%
HIV Region										
St. Louis HIV Region [†]	226	53.6%	11.5	2,069	45.7%	217	58.6%	11.0	4,328	47.5%
Kansas City HIV Region [†]	108	25.6%	9.4	1,363	30.1%	87	23.5%	7.6	3,083	33.8%
Northwest HIV Region [†]	3	0.7%	1.3	55	1.2%	7	1.9%	3.0	151	1.7%
North Central HIV Region [†]	21	5.0%	3.1	194	4.3%	17	4.6%	2.5	384	4.2%
Southwest HIV Region [†]	26	6.2%	2.7	390	8.6%	25	6.8%	2.6	702	7.7%
Southeast HIV Region [†]	8	1.9%	1.7	139	3.1%	9	2.4%	1.9	253	2.8%
Missouri Correctional Facilities ^{††}	30	7.1%	---	322	7.1%	8	2.2%	---	218	2.4%
MISSOURI	422	100.0%	7.7	4,532	100.0%	370	100.0%	6.8	9,119	100.0%

*HIV cases reported during 2001 which remained HIV cases at the end of that year.

**Per 100,000 population.

[†]Does not include persons living in correctional facilities at the time of diagnosis.

^{††}Includes state, county, and local correctional facilities.

HIV Disease Epi Profile Summary: Missouri

Table 9. Reported HIV Cases and Rates by Race/Ethnicity and Area, Missouri, 2001

Area	White, Non-Hispanic			Black, Non-Hispanic			Hispanic			Total		
	Cases	%	Rate*	Cases	%	Rate*	Cases	%	Rate*	Cases	%	Rate*
St. Louis City†	39	28.9%	26.5	90	66.7%	51.1	2	1.5%	34.1	135	100.0%	40.4
St. Louis County†	28	43.8%	3.5	34	53.1%	20.6	1	1.6%	7.3	64	100.0%	6.4
Kansas City†	40	44.9%	14.3	45	50.6%	34.6	4	4.5%	21.2	89	100.0%	20.3
Outstate Missouri†	81	77.9%	2.3	16	15.4%	11.4	3	2.9%	5.7	104	100.0%	2.8
MO Correctional Facilities††	13	43.3%	---	17	56.7%	---	0	0.0%	---	30	100.0%	---
MISSOURI*	201	47.6%	4.3	202	47.9%	33.1	10	2.4%	10.9	422	100.0%	7.7

*Per 100,000 population.

†Does not include persons living in correctional facilities at the time of diagnosis.

††Includes state, county, and local correctional facilities.

Note: Row percentages are shown.

Figure 9. Reported HIV Cases by County of Residence at Time of Diagnosis† Missouri, Cumulative Through 2001

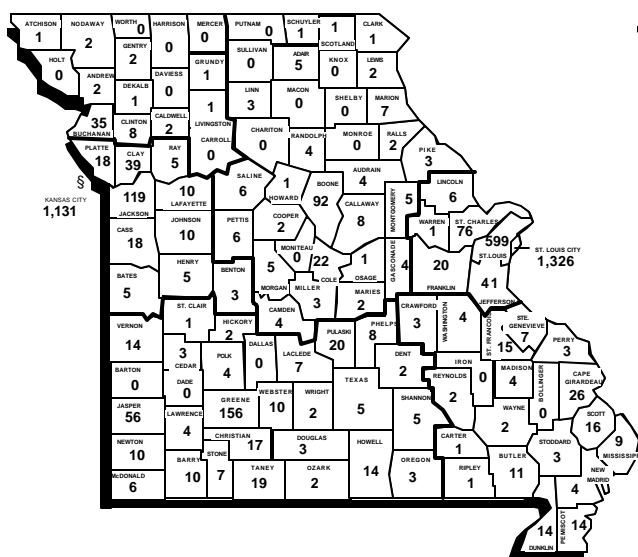
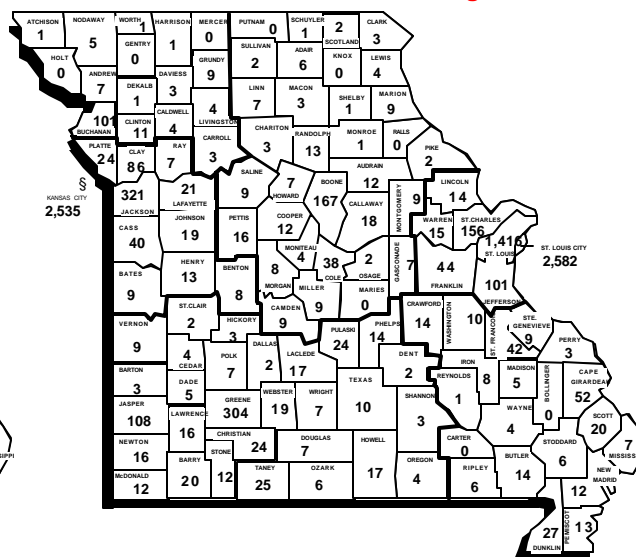


Figure 10. Reported AIDS Cases by County of Residence at Time of Diagnosis† Missouri, Cumulative Through 2001



† Does not include persons living in correctional facilities at the time of diagnosis.

§ All cases within the city limits of Kansas City are included in the totals for Kansas City. Cases indicated in Jackson, Clay and Platte counties are outside the city limits of Kansas City.

Table 10. Reported HIV Cases and Rates by Race/Ethnicity and HIV Region, Missouri, 2001

Area	White, Non-Hispanic			Black, Non-Hispanic			Hispanic			Total		
	Cases	%	Rate*	Cases	%	Rate*	Cases	%	Rate*	Cases	%	Rate*
St. Louis HIV Region†	92	40.7%	5.9	125	55.3%	35.4	3	1.3%	10.9	226	100.0%	11.5
Kansas City HIV Region†	54	50.0%	5.9	48	44.4%	27.7	4	3.7%	10.4	108	100.0%	9.4
Northwest HIV Region†	3	100.0%	1.3	0	0.0%	0.0	0	0.0%	0.0	3	100.0%	1.3
North Central HIV Region†	12	57.1%	1.9	8	38.1%	22.8	1	4.8%	15.6	21	100.0%	3.1
Southwest HIV Region†	22	84.6%	2.4	1	3.8%	7.3	2	7.7%	16.7	26	100.0%	2.7
Southeast HIV Region†	5	62.5%	1.1	3	37.5%	10.1	0	0.0%	0.0	8	100.0%	1.7
MO Correctional Facilities††	13	43.3%	---	17	56.7%	---	0	0.0%	---	30	100.0%	---
MISSOURI*	201	47.6%	4.3	202	47.9%	33.1	10	2.4%	10.9	422	100.0%	7.7

*Per 100,000 population.

†Does not include persons living in correctional facilities at the time of diagnosis.

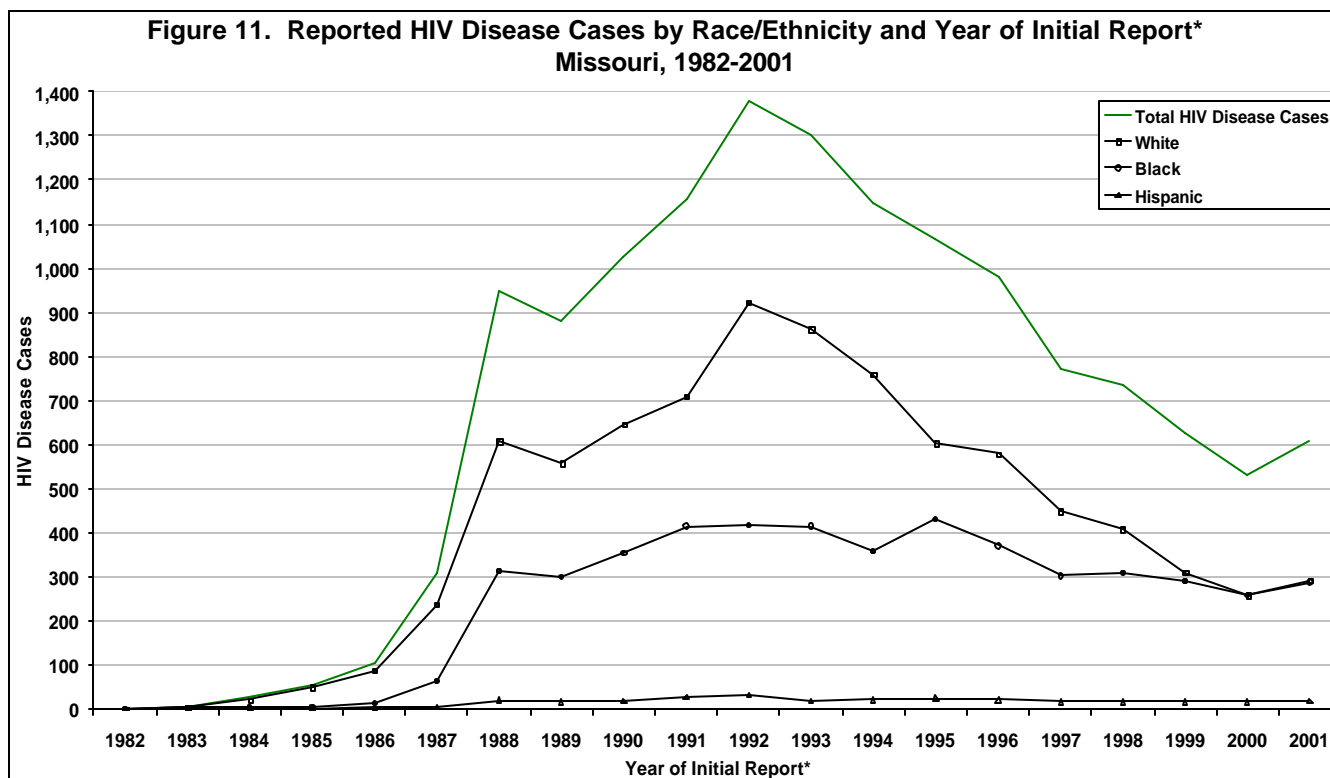
††Includes state, county, and local correctional facilities.

Note: Row percentages are shown.

HIV Disease Epi Profile Summary: Missouri

Trends

- The 607 HIV Disease cases initially reported in Missouri residents in 2001 represented a 14.1% increase from the 532 cases reported in 2000 (see Figure 2 on page 16). Prior to 2001, the annual number of reported HIV Disease cases had decreased each year from 1992 through 2000.
- Figure 11 shows reported HIV disease cases in whites and blacks by year of initial report. For whites, a peak of 923 reported HIV disease cases was seen in 1992; subsequently the annual number of reported cases decreased each year through 2000. The 291 white cases reported in 2001 represented a 12.8% increase from the 258 cases reported in 2000. For blacks, a lower peak of 430 reported HIV Disease cases was seen in 1995; then from 1995 through 2000, the annual number of reported cases generally decreased, but at a slower rate compared with white cases. The 287 black cases reported in 2001 represented an 11.7% increase from the 257 cases reported in 2000.



- The 370 AIDS cases reported in Missouri residents in 2001 represented an 10.2% decrease from the 412 cases reported in 2000 (see Figure 5 on page 18).
- From 2000 to 2001, the number of reported AIDS cases in whites decreased by 19.2% (from 198 cases reported in 2000 to 160 cases in 2001), while the number of reported cases in blacks decreased by only 2.0% (from 201 cases reported in 2000 to 197 cases in 2001).
- The 150 HIV-related deaths in Missouri residents reported on death certificates during 2001 represent an 11.2% decrease from the 169 deaths reported in 2000. The 169 deaths in 2000 represented a 14.2% increase from the 148 deaths reported in 1999. (See Figure 4 on page 17).
- From 2000 to 2001, the number of HIV Disease deaths in whites decreased by 4.7% (from 86 deaths reported in 2000 to 82 reported in 2001), while the number of HIV Disease deaths in blacks decreased by 16.0% (from 81 deaths reported in 2000 to 68 deaths in 2001).
- The 4,262 persons living with AIDS at the end of 2001 represent a 5.3% increase over the 4,049 individuals living with AIDS at the end of 2000.
- The following describe additional trends in reported AIDS cases. Such trends may provide indications as to which groups are increasingly becoming affected by the epidemic:
 - Since the mid-1980's, women have generally been making up a larger proportion of annually reported AIDS cases. Of AIDS cases reported in 2001, 18.6% were in females. By comparison, of AIDS cases reported five years previously (in 1996), only 12.1% were in females.
 - Blacks have likewise, since the mid-1980's, generally been making up a larger proportion of annually reported AIDS cases, and during each of the last three years have made up approximately half of all reported cases (53.2% of AIDS cases reported in 2001). Five years previously (in 1996), blacks made up 38.7% of reported cases.

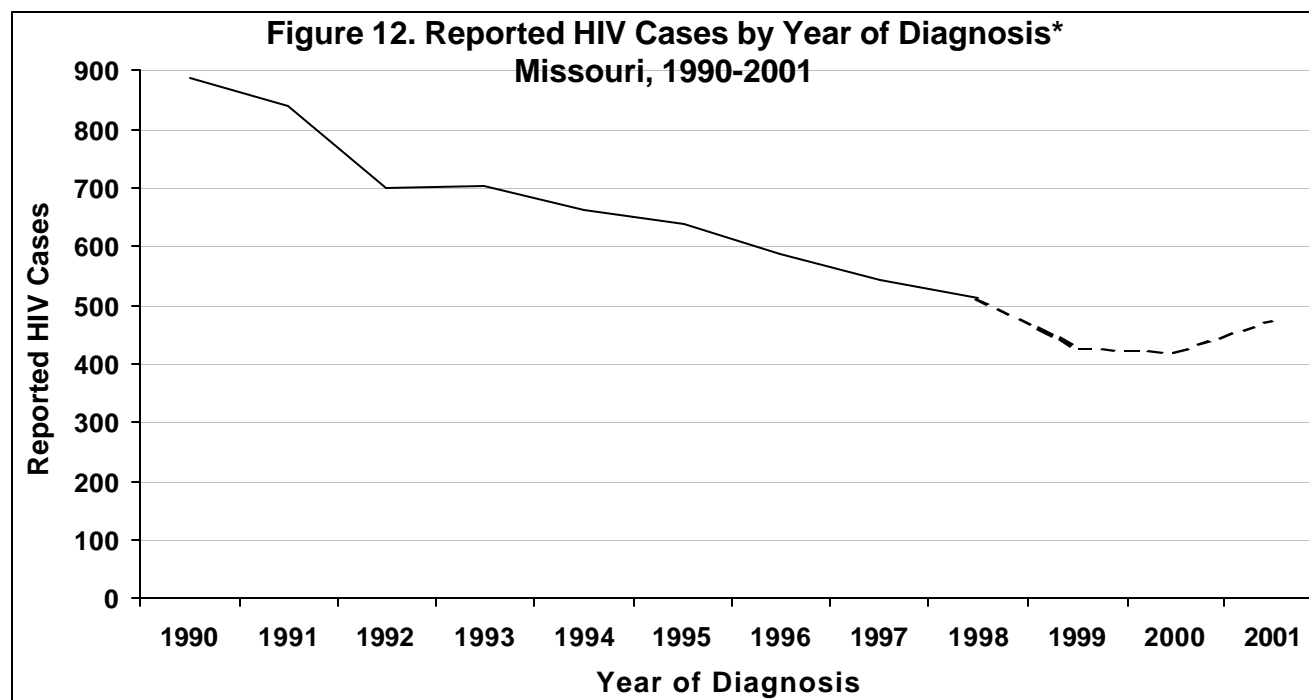
HIV Disease Epi Profile Summary: Missouri

- Heterosexual contacts have, since the mid-1980's, generally been making up a larger proportion of annually reported AIDS cases. For AIDS cases reported in 2001, it is estimated that eventually approximately 23% will be placed in the heterosexual contact exposure category (see Table 2 on page 20).
- Comparing reported HIV cases (which generally represent persons more recently infected with HIV) with reported AIDS cases (which generally represent persons less recently infected) is another potential means of discerning which groups are increasingly becoming affected by the epidemic.*
 - As indicated in Table 1 (on page 19), a higher proportion of cumulative HIV cases, compared to cumulative AIDS cases, tend to be female and black, providing evidence that among more recently infected persons a larger proportion are female and black.
 - In Table 2, cases currently placed in the "Other/Unknown" exposure category have been reassigned to a specific exposure category (such as MSM or heterosexual contact) based on past experience in reassigning such cases following investigation. As a result, HIV and AIDS cases can be better compared with regard to involvement in the epidemic by persons in different exposure categories. The data contained in Table 2 indicate that a lower proportion of cumulative HIV cases, compared to cumulative AIDS cases, are MSM, and a higher proportion are heterosexual contacts. This provides evidence that among more recently infected persons, a smaller proportion are being infected through male homosexual contact and a somewhat larger proportion are being infected through heterosexual contact. (However, it seems highly likely that the largest number of new infections continue to result from male homosexual contact [note the estimate that approximately 59% of HIV cases reported in 2001 were MSM].)

*This approach does have potential limitations. To be diagnosed as an HIV case, the individual must first have been tested for HIV. Because members of certain subpopulations may be more or less likely to be tested, different subpopulations could be over- or under-represented among reported HIV cases.

HIV Disease Epi Profile Summary: Missouri

- Another way to examine the current direction of the HIV Disease epidemic is to look at trends in reported HIV cases by year of diagnosis. This approach can be useful because HIV cases are persons diagnosed with HIV infection who have not progressed to AIDS, and so are generally closer to the time of initial infection than are persons with AIDS. Examining changes in reported HIV cases over time can thus potentially provide a general estimate of current trends in new HIV infections in the population(s) being considered.*
- Figure 12 shows reported HIV cases[¶] by year of diagnosis.^{¶¶} The annual number of diagnosed HIV cases generally decreased during the period from 1990 to 2000. However, in 2001, an increase in diagnosed HIV cases appears to have occurred (after adjustments were made for reporting delays).



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

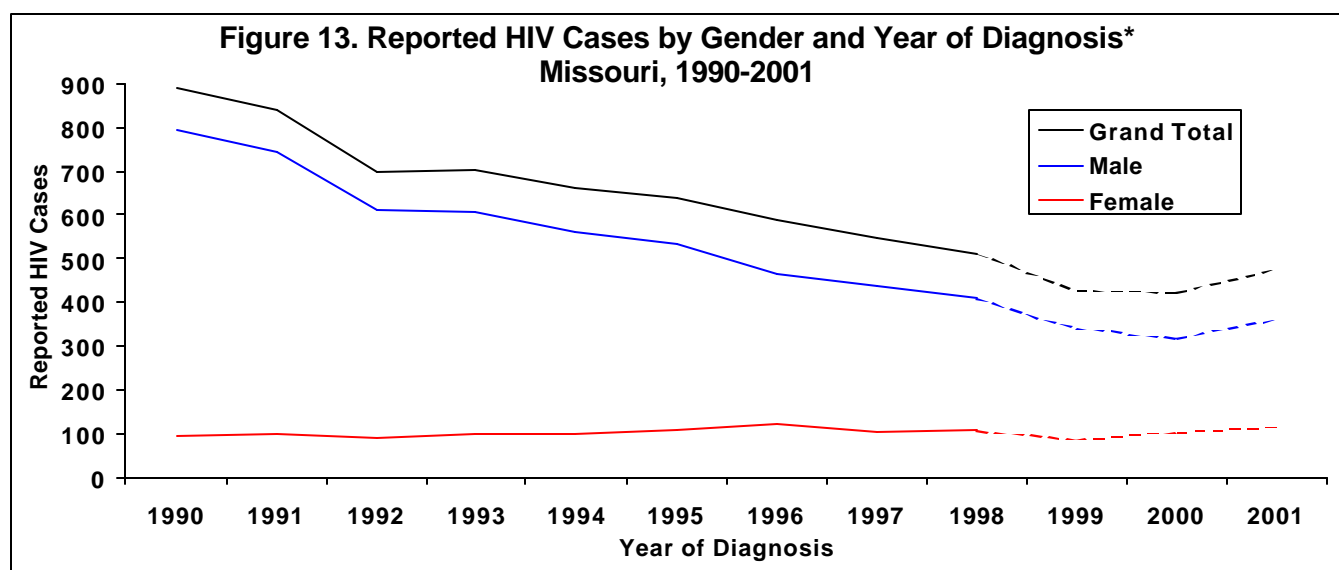
- Figure 13 shows reported HIV cases[¶] by gender and year of diagnosis.^{¶¶} For male HIV cases, the annual number of diagnosed cases generally decreased during the period from 1990 to 2000, but in 2001, a noticeable increase (of approximately 40 cases) has apparently occurred. For females, no noticeable upward or downward trends have been apparent in recent years; there appears to have been small increases in diagnosed cases in 2000 and 2001.

* This approach does have potential limitations. For many reported HIV cases, initial diagnosis of infection did not occur until several years after initial infection, so at best the trends in reported HIV cases can only approximate actual trends in new HIV infections. In addition, to be diagnosed as an HIV case, the individual must first have been tested for HIV infection. Because members of certain subpopulations may be more, or less, likely to be tested, different subpopulations could be over- or under-represented among diagnosed and reported HIV cases. Also, if changes in testing behavior among at-risk persons, or their health care providers, have occurred over time, this could lead to an increase, or decrease, in the numbers of cases diagnosed and reported.

[¶] The HIV cases shown in Figures 12 through 18 represent individuals who were HIV cases (i.e., HIV infected but not AIDS) at the time of initial diagnosis of HIV infection. Some of these individuals have subsequently progressed to AIDS, while the rest currently remain HIV cases. However, in these figures, where the emphasis is on status at the time of initial diagnosis, all are considered HIV cases. (This is in contrast to the data in Tables 1 and 2. In these tables, once an individual who is an HIV case meets the case definition for AIDS, he or she is no longer counted as an HIV case, but instead is counted as an AIDS case.)

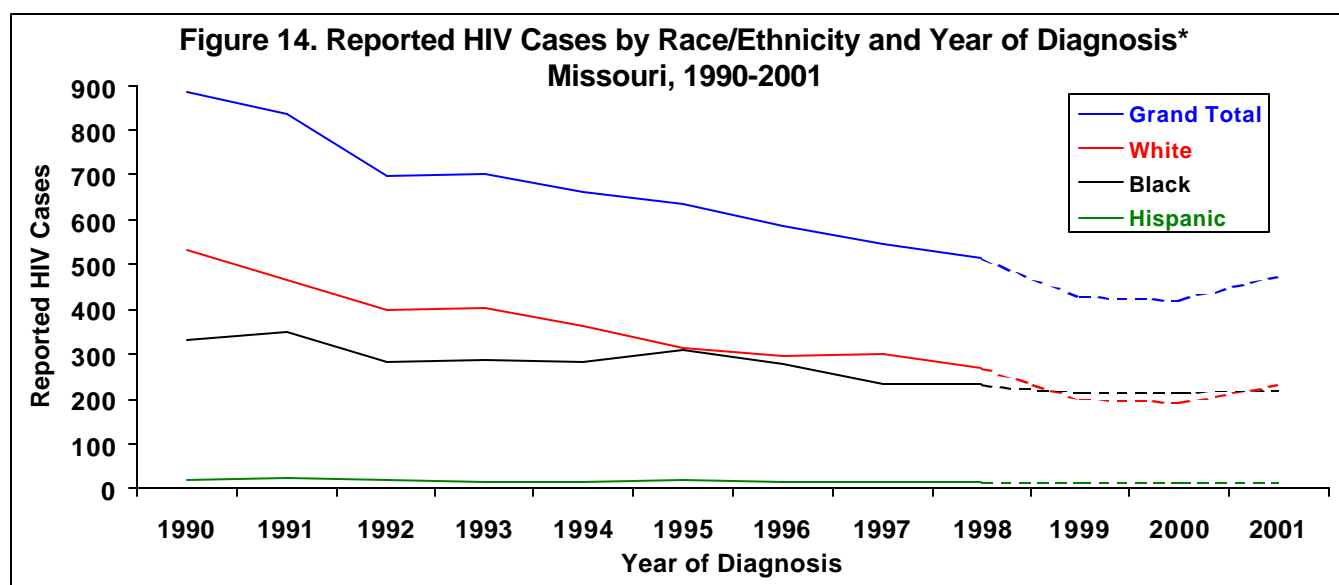
^{¶¶} Adjustments were made for delays in reporting of cases. That is, for more recent years, not all cases diagnosed during these years have been reported as yet. To adjust for this, estimates were made, based on past experience, of the additional number of cases expected to ultimately be reported, and these expected cases were added to those already reported to give the estimated total number of cases for a given year as shown in the figure.

HIV Disease Epi Profile Summary: Missouri



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

- Figure 14 shows reported HIV cases[¶] by race/ethnicity and year of diagnosis.^{¶¶} For whites, the annual number of diagnosed cases showed a general decrease during the period from 1990-2000, but from 2000-2001, the number of diagnosed cases is estimated to have increased by about 40 cases. For blacks, the annual number of diagnosed cases also generally decreased during the period from 1990-2000, although at a slower rate than in whites; from 2000-2001, a slight increase in diagnosed cases appears to have occurred. In recent years, the annual number of diagnosed Hispanic cases has remained stable at approximately 10-15 cases per year.

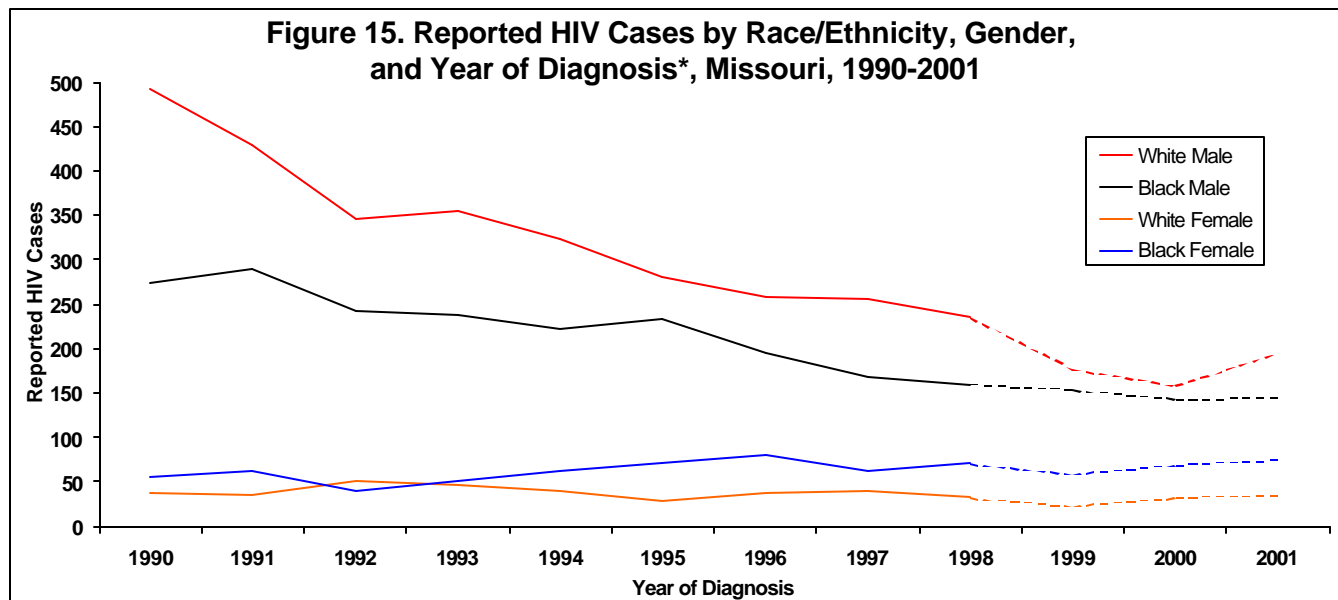


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

- Figure 15 shows reported HIV cases[¶] by year of diagnosis^{¶¶} for white males and females, and black males and females. For white and black males, the annual numbers of diagnosed cases generally decreased during the period from 1990-2000, although the overall rate of decrease was less in black men than in white men. From 2000-2001, the number of diagnosed cases appears to have increased by approximately 35 cases in white men, while staying essentially unchanged in black men. For white females and black females, no noticeable upward or downward trends have been apparent in recent years; there appears to have been small increases in diagnosed cases in 2000 and 2001 for both groups of women.

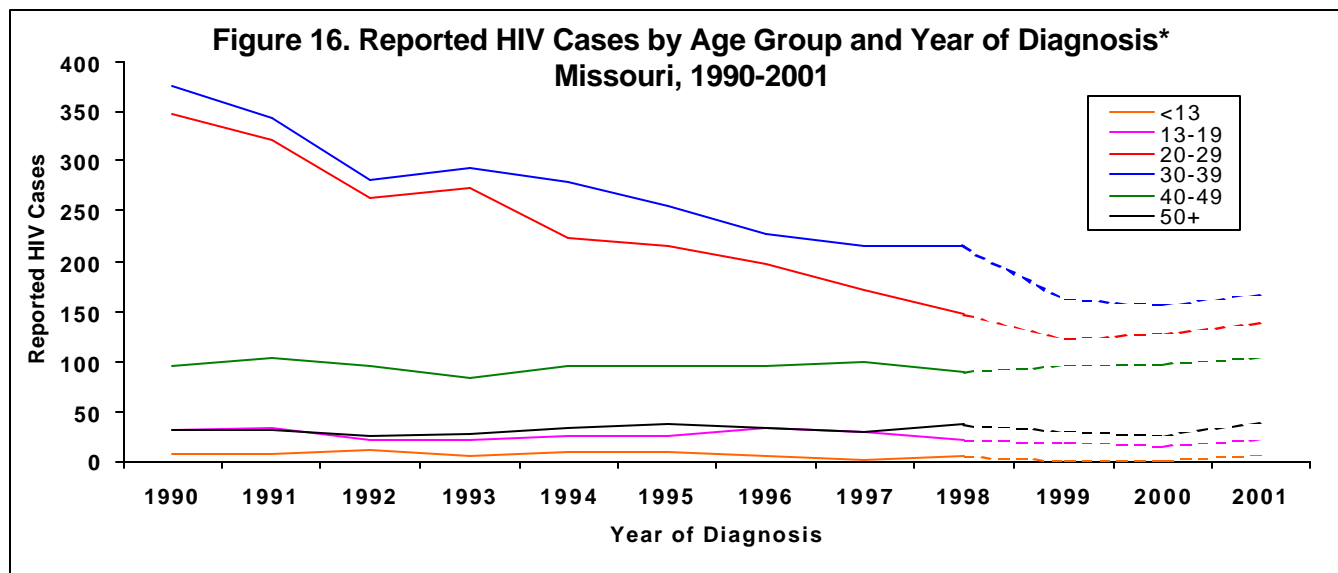
* See footnote on page 28. [¶] See footnote on page 28. ^{¶¶} See footnote on page 28.

HIV Disease Epi Profile Summary: Missouri



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

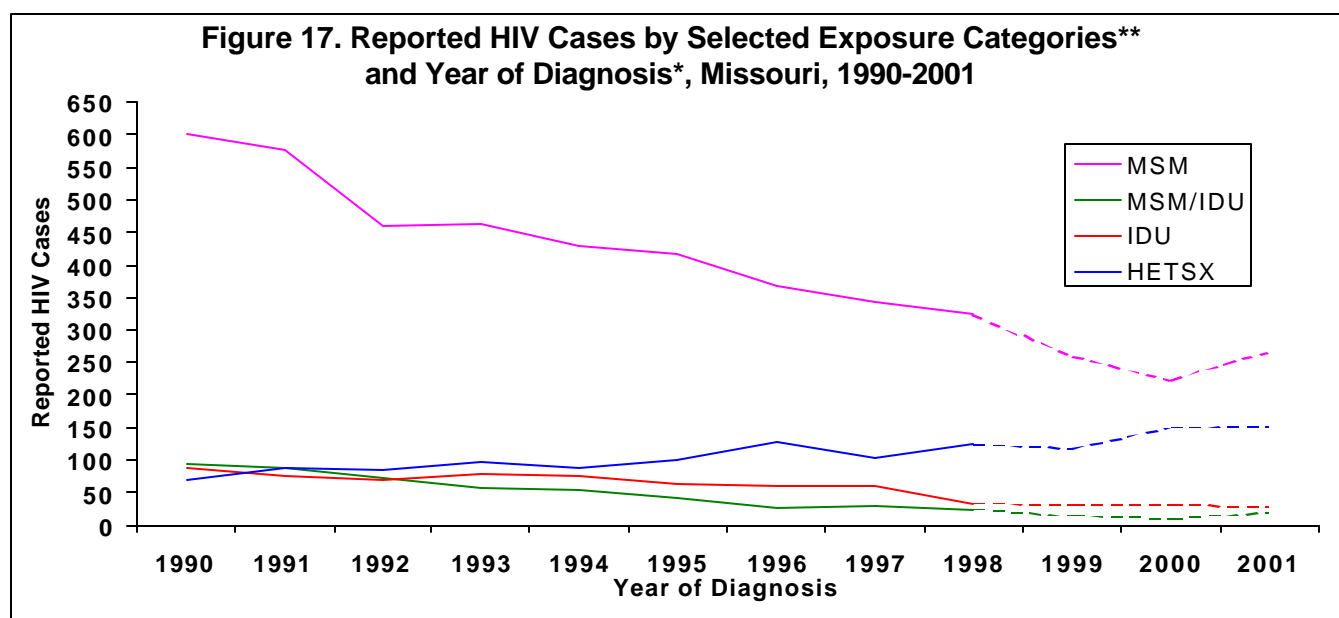
- Figure 16 shows reported HIV cases[¶] by age group and year of diagnosis.^{¶¶} This figure indicates that the overall decrease in diagnosed HIV cases during the period from 1990-2000 was generally the result of declines in the annual numbers of cases diagnosed in 20-29 year olds and 30-39 year olds; the annual numbers of cases reported from the other age groups remained generally stable. Each age group apparently experienced small increases in diagnosed cases in 2001; the largest increase (approximately 14 cases) is believed to have occurred in the 50+ age group.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

- Figure 17 shows reported HIV cases[¶] by selected exposure categories and year of diagnosis.^{¶¶} For HIV cases in MSMs, the annual number of diagnosed cases generally decreased during the period from 1990-2000, but then apparently increased by approximately 40 cases from 2000-2001. For HIV cases in heterosexual contacts, a general increase in the annual number of diagnosed cases has occurred since 1990, although the increase in cases from 2000-2001 appears to be very small. For HIV cases reported in MSM/IDUs and IDUs, small overall decreases in the annual numbers of diagnosed cases were seen from 1990 through the mid-1990's; since this time the annual numbers of diagnosed cases in both groups have generally plateaued.

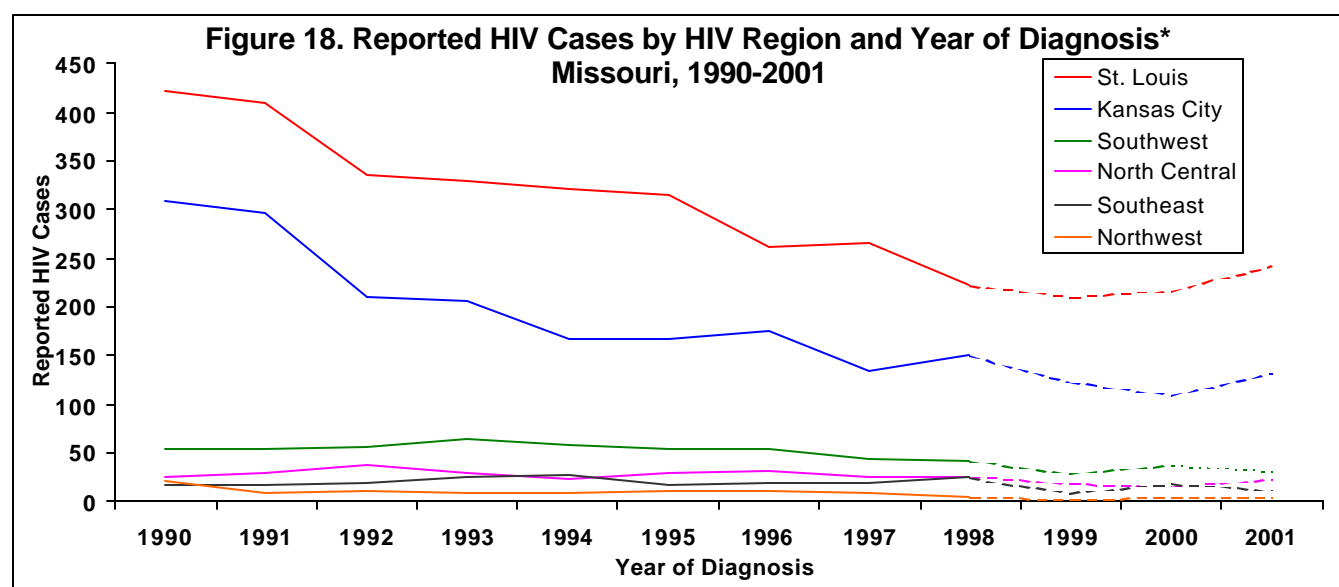
* See footnote on page 28. [¶] See footnote on page 28. ^{¶¶} See footnote on page 28.



* MSM = men who have sex with men; MSM/IDU = men who have sex with men and inject drugs; IDU = injecting drug user; HETSEX = heterosexual contact. Cases currently classified as "Risk Not Specified" (RNS), many of which are still under investigation, have, based on past experience with these types of cases, been assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, HETSEX) in order to more clearly depict trends in diagnosed HIV cases.

**Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

- Figure 18 shows reported HIV cases[†] by HIV Region and year of diagnosis.^{††} The HIV Regions with the largest numbers of HIV cases (St. Louis and Kansas City) have both had general declines in the number of diagnosed cases during the 1990s. The number of diagnosed HIV cases in the St. Louis Region appeared to increase slightly from 1999-2000, and then increased more noticeably (by approximately 25 cases) from 2000-2001. In the Kansas City Region, the number of diagnosed HIV cases is also estimated to have increased by about 25 cases from 2000-2001. The annual numbers of diagnosed HIV cases from the other regions have generally remained stable or have shown slight declines in recent years. The North Central HIV Region appears to have had a slight increase in diagnosed HIV cases from 2000-2001.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

* See footnote on page 28. [†] See footnote on page 28. ^{††} See footnote on page 28.

HIV Disease Epi Profile Summary: Missouri

Men Who Have Sex With Men (MSM)

Magnitude of the Problem

- In Missouri, from the beginning of the HIV/AIDS epidemic through 2001, a total of 8,956 HIV Disease cases have been identified as occurring in MSM who deny injecting drug use and who were residents of Missouri at the time of diagnosis (these cases make up 66.2% of all reported adult/adolescent HIV Disease cases statewide). Of these 8,956 MSM HIV Disease cases, 6,335 (70.7%) are AIDS cases and 2,621 (29.3%) are HIV cases.
- The 6,335 AIDS cases in MSM make up 70.0% of all reported adult/adolescent AIDS cases. In 2001, of the 368 adult/adolescent AIDS cases reported, 194 (52.7%) have, to date, been identified as being in MSM.
- The 2,621 HIV cases in MSM make up 58.4% of all reported adult/adolescent HIV cases. In 2001, of the 418 adult/adolescent HIV cases reported, 166 (39.7%) have, to date, been identified as being in MSM.
- These numbers, however, do not indicate the full extent of MSM involvement since for 204 adult/adolescent AIDS cases, and 416 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 20). Here it is estimated that approximately 6,454 (71.3%) of the 9,051 total reported adult/adolescent AIDS cases, and approximately 221 (60.1%) of the 368 adult/adolescent AIDS cases reported in 2001, were in MSM. Likewise, it is estimated that approximately 2,862 (63.8%) of the 4,487 total reported adult/adolescent HIV cases, and approximately 246 (58.9%) of the 418 adult/adolescent HIV cases reported in 2001, were in MSM.

Who

- Table 11 shows reported HIV and AIDS cases in MSM by race/ethnicity.
- White men comprise 69.7% of the 6,335 total reported AIDS cases among MSM, black men make up 27.9%, and Hispanic men account for 1.9%. (However, for MSM AIDS cases reported in 2001, white men made up 53.6%, black men 43.8%, and Hispanic men 1.0%.) Twenty MSM AIDS cases have been reported in American Indians, and 12 cases in Asians.
- Of the 2,621 total reported HIV cases among MSM, white men comprise 61.4%, whereas black men make up 35.3%; Hispanic men account for 2.4%. Six MSM HIV cases have been reported in American Indians, and 7 cases in Asians.

Table 11. Reported HIV and AIDS Cases in Men Who Have Sex With Men by Race/Ethnicity, Missouri, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Case	%	Case	%	Case	%	Case	%
White	93	(56.0%)	1,609	(61.4%)	104	(53.6%)	4,413	(69.7%)
Black	63	(38.0%)	926	(35.3%)	85	(43.8%)	1,770	(27.9%)
Hispanic	6	(3.6%)	62	(2.4%)	2	(1.0%)	120	(1.9%)
Other/Unknown	4	(2.4%)	24	(0.9%)	3	(1.6%)	32	(0.5%)
Total	166	(100.0%)	2,621	(100.0%)	194	(100.0%)	6,335	(100.0%)

*HIV cases reported during 2001 which remained HIV cases at the end of that year.

- Table 12 shows reported HIV cases in MSM by race/ethnicity and age group. Among white MSM, the largest proportion of reported HIV cases (42.8%) were in men 30-39 years of age at the time of initial diagnosis. Among black and Hispanic MSM, the largest proportion of cases (43.7% and 40.3%, respectively) were in men 20-29 years of age at the time of diagnosis. In addition, 6.3% of HIV cases in black MSM were diagnosed in teenagers (compared to 1.6% in whites).
- Information obtained through interviews with reported MSM HIV and AIDS cases indicates that at least 24% of these men (19% of white men and 36% of black men) have, in addition to having sex with other men, also had sex with females. (Note that the actual percentages may be higher because complete information may not have been obtained on all reported cases.)

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Table 12. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Age Group, Missouri, Cumulative Through December 2001

Age Group	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
13–19	25	(1.6%)	58	(6.3%)	2	(3.2%)	87	(3.3%)
20–29	577	(35.9%)	405	(43.7%)	25	(40.3%)	1,015	(38.7%)
30–39	689	(42.8%)	317	(34.2%)	22	(35.5%)	1,035	(39.5%)
40–49	247	(15.4%)	116	(12.5%)	11	(17.7%)	380	(14.5%)
50+	71	(4.4%)	30	(3.2%)	2	(3.2%)	104	(4.0%)
Missouri Total	1,609	(100.0%)	926	(100.0%)	62	(100.0%)	2,621	(100.0%)

Where

- Table 13 shows reported HIV cases in MSM by race/ethnicity and geographic area. Of total MSM cases reported from St. Louis City, St. Louis County, Kansas City, and Outstate Missouri, black men make up 47.2%, 40.9%, 33.5%, and 7.5%, respectively. In addition, of the 132 MSM HIV cases reported from Missouri Correctional Facilities, 72.0% were in black men.
- Of total reported HIV cases in MSM, 73.5% were in men living in either St. Louis City, St. Louis County, or Kansas City at the time of diagnosis; in addition, 66.6% of white MSM HIV cases, 85.2% of black MSM cases, and 82.3% of Hispanic MSM cases were from one of these three locations.
- Of the 2,621 total HIV cases reported in MSM, 1,295 (49.4%) were from the St. Louis HIV Region and 828 (31.6%) from the Kansas City HIV Region. The total numbers of cases reported from the Outstate HIV Regions were: Southwest, 177 cases; North Central, 101 cases; Southeast, 57 cases; and Northwest, 31 cases. In addition, 132 HIV cases in MSM have been reported from persons residing in Missouri correctional facilities at the time of diagnosis.

Table 13. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Geographic Area, Missouri, Cumulative Through December 2001

Geographic Area	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
St. Louis City	436	(51.5%)	399	(47.2%)	6	(0.7%)	846	(100.0%)
St. Louis County	211	(56.4%)	153	(40.9%)	8	(2.1%)	374	(100.0%)
Kansas City	425	(60.1%)	237	(33.5%)	37	(5.2%)	707	(100.0%)
Outstate	502	(89.3%)	42	(7.5%)	9	(1.6%)	562	(100.0%)
Missouri Correctional Facilities	35	(26.5%)	95	(72.0%)	2	(1.5%)	132	(100.0%)
Missouri Total	1,609	(61.4%)	926	(35.3%)	62	(2.4%)	2,621	(100.0%)
HIV Region								
St. Louis Region	718	(55.4%)	554	(42.8%)	15	(1.2%)	1,295	(100.0%)
Kansas City Region	534	(64.5%)	243	(29.3%)	40	(4.8%)	828	(100.0%)
Northwest Region	30	(96.8%)	1	(3.2%)	0	(0.0%)	31	(100.0%)
North Central Region	76	(75.2%)	21	(20.8%)	2	(2.0%)	101	(100.0%)
Southwest Region	165	(93.2%)	7	(4.0%)	2	(1.1%)	177	(100.0%)
Southeast Region	51	(89.5%)	5	(8.8%)	1	(1.8%)	57	(100.0%)
Missouri Correctional Facilities	35	(26.5%)	95	(72.0%)	2	(1.5%)	132	(100.0%)
Missouri Total	1,609	(61.4%)	926	(35.3%)	62	(2.4%)	2,621	(100.0%)

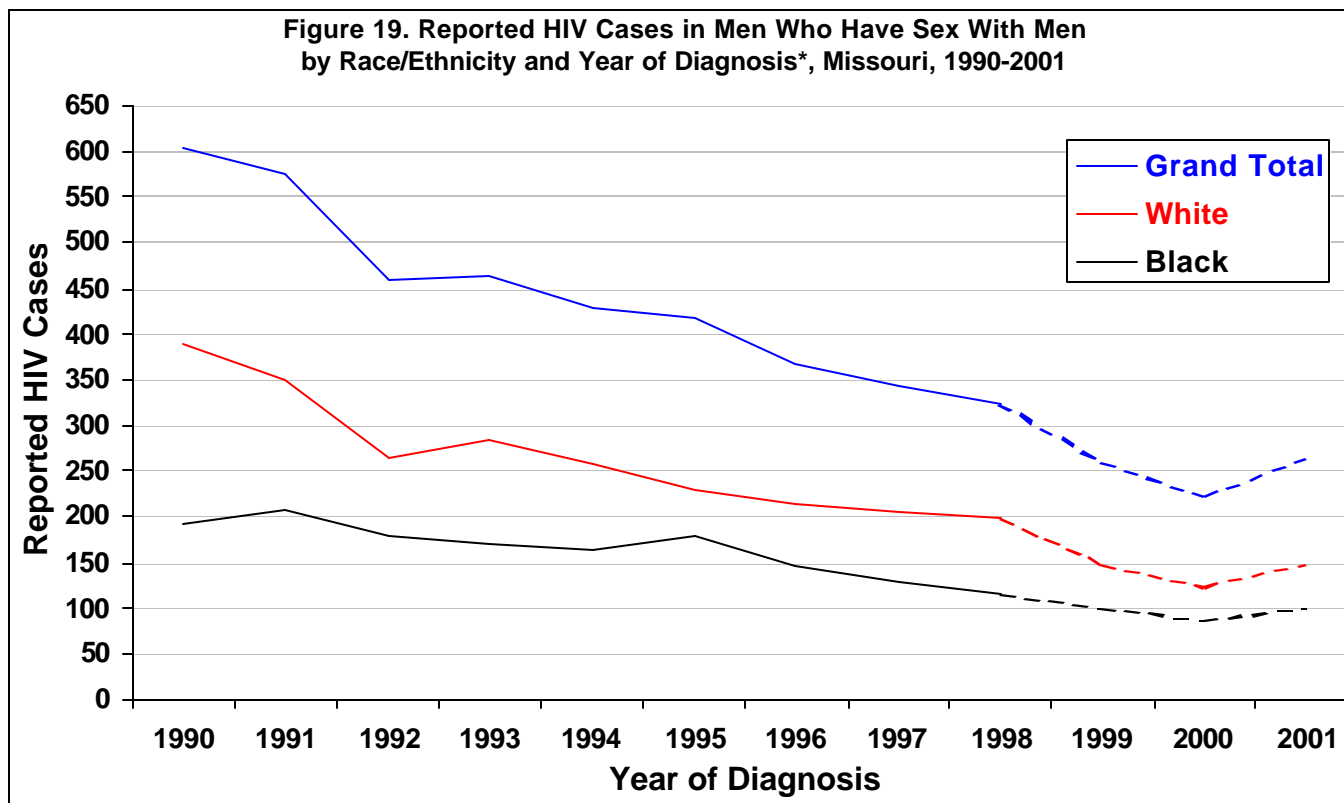
NOTE: Row percentages are shown.

Trends

- As indicated in Table 2 (on page 20), a lower proportion of cumulative HIV cases (64.0%), compared to cumulative AIDS cases (71.3%), appear to be MSM, providing evidence that among more recently infected persons a smaller proportion are MSM.
- Since the mid-1980's, black men have, in general, slowly been making up a larger proportion of annually reported AIDS cases in MSM. Of MSM AIDS cases reported in 2001, 43.8% were in black men. By comparison, of MSM AIDS cases reported five years previously (in 1996), only 34.9% were in black men.

HIV Disease Epi Profile Summary: Missouri

- Figure 19 shows reported HIV cases[¶] in MSM by race and year of diagnosis.^{¶¶} The annual number of diagnosed HIV cases in MSM generally decreased during the period from 1990-2000, but then apparently increased by approximately 40 cases from 2000-2001. For both white and black MSM, the annual number of diagnosed cases generally decreased from the early 1990s through 2000, although the overall rate of decrease was slower for black cases. From 2000-2001, the numbers of diagnosed cases appear to have increased in both groups (by approximately 30 cases in white men, and by about 10 cases in black men).



[¶] See footnote on page 28. ^{¶¶} See footnote on page 28.

Men Who Have Sex With Men and Inject Drugs (MSM/IDU)

Magnitude of the Problem

- In Missouri, from the beginning of the HIV/AIDS epidemic through 2001, a total of 1,059 HIV Disease cases have been identified as occurring in MSM/IDUs who were residents of Missouri at the time of diagnosis (these cases make up 7.8% of all reported adult/adolescent HIV Disease cases statewide). Of these 1,059 MSM/IDU HIV Disease cases, 794 (75.0%) are AIDS cases and 265 (25.0%) are HIV cases.
- The 794 AIDS cases in MSM/IDUs make up 8.8% of all reported adult/adolescent AIDS cases. In 2001, of the 368 adult/adolescent AIDS cases reported, 17 (4.6%) have, to date, been identified as being in MSM/IDUs.
- The 265 HIV cases in MSM/IDUs make up 5.9% of all reported adult/adolescent HIV cases. In 2001, of the 418 adult/adolescent HIV cases reported, 10 (2.4%) have, to date, been identified as being in MSM/IDUs.
- These numbers, however, do not indicate the full extent of MSM/IDU involvement since for 204 adult/adolescent AIDS cases, and 416 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 20). Here it is estimated that approximately 802 (8.9%) of the 9,051 total reported adult/adolescent AIDS cases, and approximately 20 (5.4%) of the 368 adult/adolescent AIDS cases reported in 2001, were in MSM/IDUs. Likewise, it is estimated that approximately 282 (6.6%) of the 4,487 total reported adult/adolescent HIV cases, and approximately 15 (3.6%) of the 418 adult/adolescent HIV cases reported in 2001, were in MSM/IDUs.

Who

- Table 14 shows reported HIV and AIDS cases in MSM/IDUs by race/ethnicity.
- Of the 265 total reported HIV cases among MSM/IDUs, white men comprise 64.5% and black men make up 32.8%. Four MSM/IDU HIV cases have been reported in Hispanic men, and 3 cases have been reported in American Indian men.
- White men comprise 65.9% of the 794 total reported AIDS cases among MSM/IDUs, black men make up 31.7%, and Hispanic men account for 1.6%. Six MSM/IDU AIDS cases have been reported in American Indian men.

Table 14. Reported HIV and AIDS Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity, Missouri, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Case	%	Case	%	Case	%	Case	%
White	9	(90.0%)	171	(64.5%)	7	(41.1%)	523	(65.9%)
Black	1	(10.0%)	87	(32.8%)	10	(58.9%)	252	(31.7%)
Hispanic	0	(0.0%)	4	(1.5%)	0	(0.0%)	13	(1.6%)
Other/Unknown	0	(0.0%)	3	(1.1%)	0	(0.0%)	6	(0.8%)
Total	10	(100.0%)	265	(100.0%)	17	(100.0%)	794	(100.0%)

*HIV cases reported during 2001 which remained HIV cases at the end of that year.

- Table 15 shows reported HIV cases in MSM/IDUs by race/ethnicity and age group. Among both white and black MSM/IDUs, the largest proportion of reported HIV cases (44.4% and 42.5%, respectively) were in men 30-39 years of age at the time of initial diagnosis.
- Information obtained through interviews with reported MSM/IDU HIV and AIDS cases indicates that at least 44% of these men (39% of white men and 53% of black men) have, in addition to having sex with other men, also had sex with females. (Note that the actual percentages may be higher because complete information may not have been obtained on all reported cases.)

HIV Disease Epi Profile Summary: Missouri

Table 15. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity and Age Group, Missouri, Cumulative Through December 2001

Age Group	White		Black		Total	
	Cases	%	Cases	%	Cases	%
13-19	7	(4.1%)	4	(4.6%)	11	(4.2%)
20-29	60	(35.1%)	29	(33.3%)	93	(35.1%)
30-39	76	(44.4%)	37	(42.5%)	114	(43.0%)
40-49	25	(14.6%)	16	(18.4%)	43	(16.2%)
50+	3	(1.8%)	1	(1.1%)	4	(1.5%)
Missouri Total	171	(100.0%)	87	(100.0%)	265	(100.0%)

Where

- Table 16 shows reported HIV cases in MSM/IDUs by race/ethnicity and geographic area. Of total MSM/IDU cases reported from St. Louis City, St. Louis County, Kansas City, and Outstate Missouri, blacks make up 57.4%, 30.8%, 25.6%, and 9.1%, respectively. In addition, of the 35 MSM/IDU HIV cases reported from Missouri Correctional Facilities, 65.7% were in black men.
- Of total reported HIV cases in MSM/IDUs, 57.7% were in men living in either St. Louis City, St. Louis County, or Kansas City at the time of diagnosis; in addition, 52.6% of white MSM/IDU HIV cases, 65.5% of black MSM/IDU cases, and 100% of Hispanic MSM/IDU cases (4 total cases) were from one of these three locations.
- Of the 265 total HIV cases reported in MSM/IDUs, 71 (26.7%) were from the St. Louis HIV Region and 104 (39.2%) from the Kansas City HIV Region. The total numbers of cases reported from the Outstate HIV Regions were: Southwest, 29 cases; Southeast, 11 cases; North Central, 9 cases; and Northwest, 6 cases. In addition, 35 HIV cases in MSM/IDUs have been reported from persons residing in Missouri correctional facilities at the time of diagnosis.

Table 16. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity and Geographic Area, Missouri, Cumulative Through December 2001

Geographic Area	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
St. Louis City	21	(38.9%)	31	(57.4%)	1	(1.9%)	54	(100.0%)
St. Louis County	9	(69.2%)	4	(30.8%)	0	(0.0%)	13	(100.0%)
Kansas City	60	(69.8%)	22	(25.6%)	3	(3.5%)	86	(100.0%)
Outstate	69	(89.6%)	7	(9.1%)	0	(0.0%)	77	(100.0%)
Missouri Correctional Facilities	12	(34.3%)	23	(65.7%)	0	(0.0%)	35	(100.0%)
Missouri Total	171	(64.5%)	87	(32.8%)	4	(1.5%)	265	(100.0%)
HIV Region								
St. Louis Region	33	(46.5%)	36	(50.7%)	1	(1.4%)	71	(100.0%)
Kansas City Region	77	(74.0%)	23	(22.1%)	3	(2.9%)	104	(100.0%)
Northwest Region	5	(83.3%)	0	(0.0%)	0	(0.0%)	6	(100.0%)
North Central Region	8	(88.9%)	1	(11.1%)	0	(0.0%)	9	(100.0%)
Southwest Region	27	(93.1%)	2	(6.9%)	0	(0.0%)	29	(100.0%)
Southeast Region	9	(81.8%)	2	(18.2%)	0	(0.0%)	11	(100.0%)
Missouri Correctional Facilities	12	(34.3%)	23	(65.7%)	0	(0.0%)	35	(100.0%)
Missouri Total	171	(64.5%)	87	(32.8%)	4	(1.5%)	265	(100.0%)

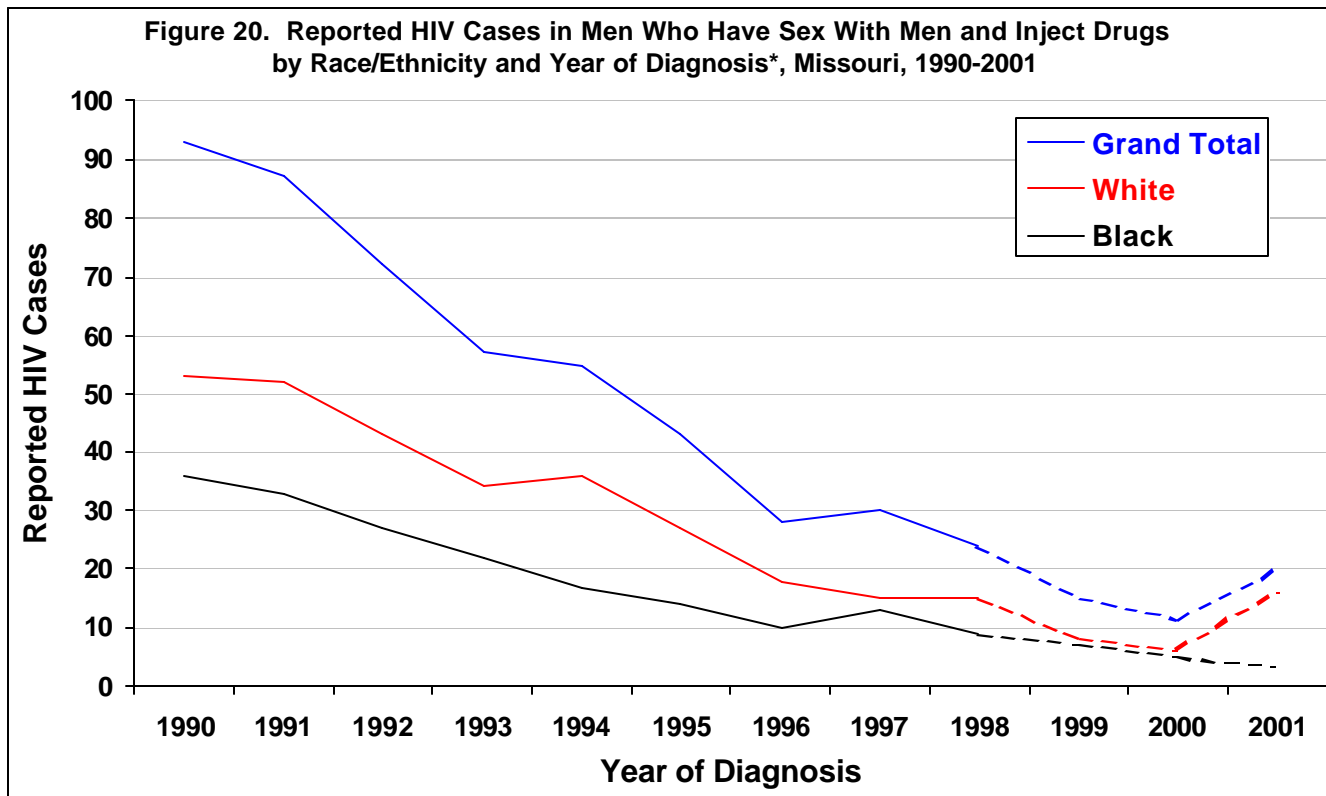
NOTE: Row percentages are shown.

Trends

- Figure 20 shows reported HIV cases[¶] in MSM/IDUs by race/ethnicity and year of diagnosis.^{¶¶} The annual number of diagnosed HIV cases in MSM/IDUs generally decreased during the period from 1990-2000, but then apparently increased by approximately 10 cases from 2000-2001. The overall decrease in the annual number of diagnosed cases from 1990-2000 occurred in both white and black MSM/IDUs, but the increase in cases from 2000-2001 occurred only in white men.

[¶] See footnote on page 28. ^{¶¶} See footnote on page 28.

HIV Disease Epi Profile Summary: Missouri



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Missouri

Injecting Drug Users (IDUs)

Magnitude of the Problem

- In Missouri, from the beginning of the HIV/AIDS epidemic through 2001, a total of 1,072 HIV Disease cases have been identified as occurring in IDUs* who were residents of Missouri at the time of diagnosis (these cases make up 7.9% of all reported adult/adolescent HIV Disease cases statewide). Of these 1,072 IDU HIV Disease cases, 680 (63.4%) are AIDS cases and 392 (36.6%) are HIV cases.
- The 680 AIDS cases in IDUs make up 7.5% of all reported adult/adolescent AIDS cases. In 2001, of the 368 adult/adolescent AIDS cases reported, 37 (10.1%) have, to date, been identified as being in IDUs.
- The 392 HIV cases in IDUs make up 8.7% of all reported adult/adolescent HIV cases. In 2001, of the 418 adult/adolescent HIV cases reported, 18 (4.3%) have, to date, been identified as being in IDUs.
- These numbers, however, do not indicate the full extent of IDUs involvement since for 204 adult/adolescent AIDS cases, and 416 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 20). Here it is estimated that approximately 703 (7.8%) of the 9,051 total reported adult/adolescent AIDS cases, and approximately 39 (10.6%) of the 368 adult/adolescent AIDS cases reported in 2001, were in IDUs. Likewise, it is estimated that approximately 418 (9.3%) of the 4,487 total reported adult/adolescent HIV cases, and approximately 26 (6.2%) of the 418 adult/adolescent HIV cases reported in 2001, were in IDUs.

Who

- Table 17 shows reported HIV and AIDS cases in IDUs by race/ethnicity and gender.
- Black males comprise 33.9% of the 392 total reported HIV cases among IDUs; white males make up 32.9%; black females 15.3%; and white females 14.5%. Eight IDU HIV cases have been reported in Hispanic males, and 1 case in a Hispanic female. Two IDU HIV cases have been reported in American Indians.
- Black males comprise 32.7% of the 633 total reported AIDS cases among IDUs; white males make up 31.8%; black females 18.0%; white females 13.3%; Hispanic males, 3.2%; and Hispanic females, 0.8% (5 cases). Two IDU AIDS cases have been reported in American Indians.

Table 17. Reported HIV and AIDS Cases in Injecting Drug Users by Race/Ethnicity and Gender, Missouri, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Case	%	Case	%	Case	%	Case	%
White Male	8	(44.4%)	129	(32.9%)	12	(32.4%)	215	(31.6%)
Black Male	4	(22.2%)	133	(33.9%)	11	(29.7%)	220	(32.4%)
Hispanic Male	0	(0.0%)	8	(2.0%)	1	(2.7%)	21	(3.1%)
White Female	3	(16.7%)	57	(14.5%)	5	(13.5%)	91	(13.4%)
Black Female	3	(16.7%)	60	(15.3%)	7	(18.9%)	125	(18.4%)
Hispanic Female	0	(0.0%)	1	(0.3%)	1	(2.7%)	6	(0.9%)
Total	18	(100.0%)	392	(100.0%)	37	(100.0%)	680	(100.0%)

*HIV cases reported during 2001 which remained HIV cases at the end of that year.

- Table 18 shows reported HIV cases in IDUs by race/ethnicity, gender, and age group. Among white male, black male, and black female IDUs, the largest proportion of reported HIV cases (48.1%, 48.1%, and 55.0%, respectively) were in persons 30-39 years of age at the time of initial diagnosis. Among white females, the largest proportion of reported HIV cases (40.4%) were in women 20-29 years of age at the time of diagnosis.

* For an HIV-infected man to be placed in the IDU exposure category, he must, in addition to acknowledging injecting drug use, have denied having sex with other men. If he states that he has had sex with other men, he will be classified as an MSM/IDU.

HIV Disease Epi Profile Summary: Missouri

Table 18. Reported HIV Cases in Injecting Drug Users by Race/Ethnicity, Gender, and Age Group, Missouri, Cumulative Through December 2001

Age Group	White Males		Black Males		White Females		Black Females		Total	
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
13–19	4	(3.1%)	3	(2.3%)	6	(10.5%)	1	(1.7%)	14	(3.6%)
20–29	42	(32.6%)	33	(24.8%)	23	(40.4%)	11	(18.3%)	114	(29.1%)
30–39	62	(48.1%)	64	(48.1%)	21	(36.8%)	33	(55.0%)	187	(47.7%)
40–49	17	(13.2%)	26	(19.5%)	7	(12.3%)	11	(18.3%)	62	(15.8%)
50+	4	(3.1%)	7	(5.3%)	0	(0.0%)	4	(6.7%)	15	(3.8%)
Missouri Total	129	(100.0%)	133	(100.0%)	57	(100.0%)	60	(100.0%)	392	(100.0%)

Where

- Table 19 shows reported HIV cases in IDUs by race/ethnicity and geographic area. Of total IDU cases reported from St. Louis City, St. Louis County, Kansas City, and Outstate Missouri, blacks make up 82.2%, 65.2%, 60.5%, and 8.9%, respectively. In addition, of the 79 IDU HIV cases reported from Missouri Correctional Facilities, 59.5% were in blacks.
- Of total reported HIV cases in IDUs, 48.2% were in persons living in either St. Louis City, St. Louis County, or Kansas City at the time of diagnosis; in addition, 25.8% of white IDU HIV cases, 69.9% of black IDU cases, and 55.6% of Hispanic IDU cases were from one of these three locations. (According to 1999 population estimates, approximately 32% of Missouri's total population, 26% of the state's white population, 77% of the black population, and 42% of the Hispanic population resides in either St. Louis City, St. Louis County, or Kansas City.)
- Of the 392 total HIV cases reported in IDUs, 113 (28.8%) were from the St. Louis HIV Region and 96 (24.5%) from the Kansas City HIV Region. The total numbers of cases reported from the Outstate HIV Regions were: Southwest, 51 cases; North Central, 19 cases; Southeast, 13 cases; and Northwest, 4 cases. In addition, 79 HIV cases in IDUs have been reported from persons residing in Missouri correctional facilities at the time of diagnosis.

Table 19. Reported HIV Cases in Injecting Drug Users by Race/Ethnicity and Geographic Area, Missouri, Cumulative Through December 2001

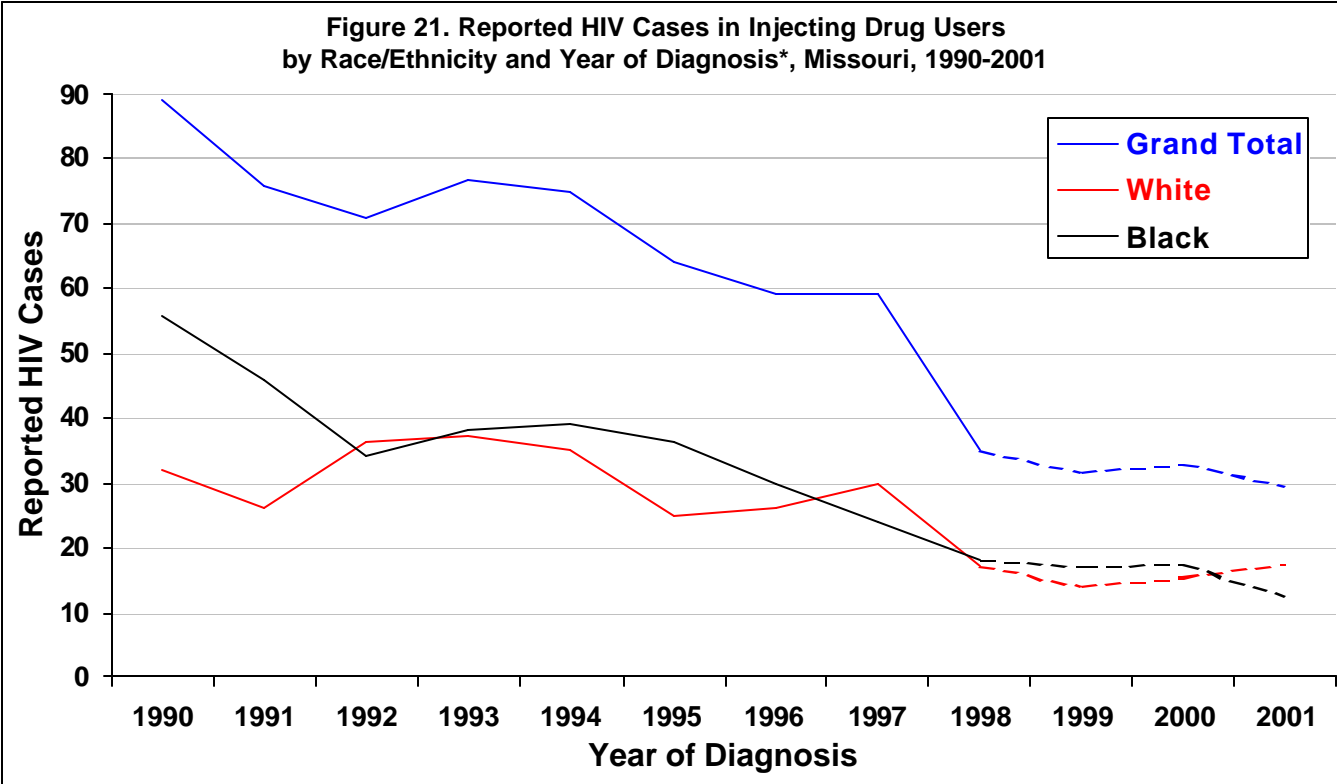
Geographic Area	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
St. Louis City	16	(17.7%)	74	(82.2%)	0	(0.0%)	90	(100.0%)
St. Louis County	7	(30.4%)	15	(65.2%)	0	(0.0%)	23	(100.0%)
Kansas City	25	(32.9%)	46	(60.5%)	5	(6.6%)	76	(100.0%)
Outstate	104	(83.9%)	11	(8.9%)	3	(2.4%)	124	(100.0%)
Missouri Correctional Facilities	29	(36.7%)	47	(59.5%)	1	(1.3%)	79	(100.0%)
Missouri Total	186	(47.4%)	193	(49.2%)	9	(2.3%)	392	(100.0%)
HIV Region								
St. Louis Region	23	(20.4%)	89	(78.8%)	0	(0.0%)	113	(100.0%)
Kansas City Region	42	(43.8%)	48	(50.0%)	6	(6.3%)	96	(100.0%)
Northwest Region	4	(100.0%)	0	(0.0%)	0	(0.0%)	4	(100.0%)
North Central Region	18	(94.7%)	1	(5.3%)	0	(0.0%)	19	(100.0%)
Southwest Region	43	(84.3%)	5	(9.8%)	2	(3.9%)	51	(100.0%)
Southeast Region	10	(76.9%)	3	(23.1%)	0	(0.0%)	13	(100.0%)
Missouri Correctional Facilities	29	(36.7%)	47	(59.5%)	1	(1.3%)	79	(100.0%)
Missouri Total	186	(47.4%)	193	(49.2%)	9	(2.3%)	392	(100.0%)

NOTE: Row percentages are shown.

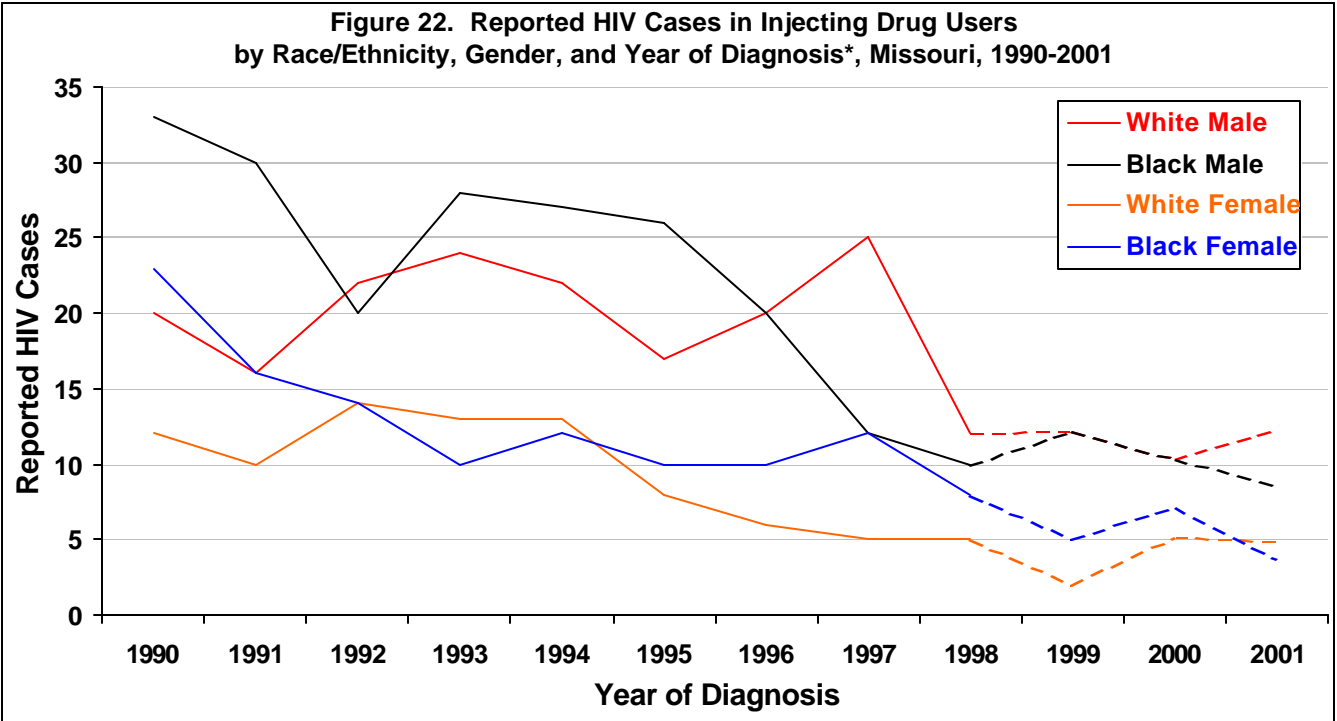
HIV Disease Epi Profile Summary: Missouri

Trends

- Figure 21 shows reported HIV cases[¶] in IDUs by race/ethnicity and year of diagnosis.^{¶¶} Figure 22 shows reported HIV cases[¶] in IDUs by race/ethnicity, gender, and year of diagnosis.^{¶¶} The annual number of diagnosed HIV cases in IDUs generally decreased during the period from 1990-1999; during the past 2 years the number of diagnosed cases has remained essentially unchanged.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

[¶] See footnote on page 28. ^{¶¶} See footnote on page 28.

Heterosexual Contacts

Magnitude of the Problem

- In Missouri, from the beginning of the HIV/AIDS epidemic through 2001, a total of 1,540 HIV Disease cases have been identified as occurring in heterosexual contacts who were residents of Missouri at the time of diagnosis (these cases make up 11.4% of all reported adult/adolescent HIV Disease cases statewide). Of these 1,540 heterosexual contact HIV Disease cases, 792 (51.4%) are AIDS cases and 748 (48.6%) are HIV cases.
- The 792 AIDS cases in heterosexual contacts make up 8.8% of all reported adult/adolescent AIDS cases. In 2001, of the 368 adult/adolescent AIDS cases reported, 68 (18.5%) have, to date, been identified as being in heterosexual contacts.
- The 748 HIV cases in heterosexual contacts make up 16.7% of all reported adult/adolescent HIV cases. In 2001, of the 418 adult/adolescent HIV cases reported, 78 (18.7%) have, to date, been identified as being in heterosexual contacts.
- These numbers, however, do not indicate the full extent of heterosexual contact involvement since for 204 adult/adolescent AIDS cases, and 416 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 20). Here it is estimated that approximately 846 (9.3%) of the 9,051 total reported adult/adolescent AIDS cases, and approximately 84 (22.8%) of the 368 adult/adolescent AIDS cases reported in 2001, were in heterosexual contacts. Likewise, it is estimated that approximately 880 (19.6%) of the 4,487 total reported adult/adolescent HIV cases, and approximately 128 (30.6%) of the 418 adult/adolescent HIV cases reported in 2001, were in heterosexual contacts.

Who

- Table 20 shows reported HIV and AIDS cases in heterosexual contacts by race/ethnicity and gender.
- Black females comprise 46.3% of the 748 total reported HIV cases among heterosexual contacts; white females make up 26.6%; black males 16.8%; and white males 7.5%. Four heterosexual contact HIV cases have been reported in Hispanic males, and 8 cases in Hispanic females. Two heterosexual contact HIV cases have been reported in American Indians, and 5 cases in Asians.
- Black females comprise 40.2% of the 674 total reported AIDS cases among heterosexual contacts; white females make up 32.6%; black males 12.9%; and white males 11.7%. Four heterosexual contact AIDS cases have been reported in Hispanic males, and 6 cases in Hispanic females. Four heterosexual contact AIDS cases have been reported in American Indians, and 2 cases in Asians.

Table 20. Reported HIV and AIDS Cases in Heterosexual Contacts by Race/Ethnicity and Gender, Missouri, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Case	%	Case	%	Case	%	Case	%
White Male	6	(7.7%)	56	(7.5%)	4	(6.3%)	87	(11.7%)
Black Male	15	(9.2%)	126	(16.8%)	16	(18.8%)	121	(12.9%)
Hispanic Male	0	(0.0%)	4	(0.5%)	0	(1.6%)	4	(0.6%)
White Female	16	(20.5%)	199	(26.6%)	12	(25.0%)	237	(32.6%)
Black Female	40	(51.3%)	346	(46.3%)	35	(48.4%)	329	(40.2%)
Hispanic Female	0	(0.0%)	8	(1.1%)	1	(0.0%)	7	(0.9%)
Total	78	(100.0%)	748	(100.0%)	68	(100.0%)	792	(100.0%)

*HIV cases reported during 2001 which remained HIV cases at the end of that year.

- Table 21 shows reported HIV cases in heterosexual contacts by race/ethnicity, gender, and age group. Among black male heterosexual contacts, the largest proportion of reported HIV cases (39.7%) were in persons 30-39 years of age at the time of initial diagnosis. Among white male, white female, and black female heterosexual contacts, the largest proportion of reported HIV cases (33.9%, 46.7%, and 39.6%, respectively) were in persons 20-29 years of age at the time of initial diagnosis.

HIV Disease Epi Profile Summary: Missouri

Table 21. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity, Gender, and Age Group, Missouri, Cumulative Through December 2001

Age Group	White Males		Black Males		White Females		Black Females		Total	
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
13–19	1	(1.8%)	4	(3.2%)	21	(10.6%)	55	(15.9%)	82	(11.0%)
20–29	19	(33.9%)	49	(38.8%)	93	(46.7%)	137	(39.6%)	303	(40.5%)
30–39	17	(30.4%)	50	(39.7%)	51	(25.6%)	107	(30.9%)	231	(30.9%)
40–49	13	(23.2%)	15	(11.9%)	23	(11.6%)	35	(10.1%)	93	(12.4%)
50+	6	(10.7%)	8	(6.3%)	11	(5.5%)	12	(3.5%)	39	(5.2%)
Missouri Total	56	(100.0%)	126	(100.0%)	199	(100.0%)	346	(100.0%)	748	(100.0%)

Where

- Table 22 shows reported HIV cases in heterosexual contacts by race/ethnicity and geographic area. Of total heterosexual contact cases reported from St. Louis City, St. Louis County, Kansas City, and Outstate Missouri, blacks make up 89.0%, 70.1%, 68.4%, and 28.4%, respectively. In addition, of the 40 heterosexual contact HIV cases reported from Missouri correctional facilities, 75.0% were in blacks.
- Of total reported HIV cases in heterosexual contacts, 64.0% were in persons living in either St. Louis City, St. Louis County, or Kansas City at the time of diagnosis; in addition, 35.7% of white heterosexual contact HIV cases, 79.9% of black heterosexual contact cases, and 50.0% of Hispanic heterosexual contact cases were from one of these three locations. (According to 1999 population estimates, approximately 32% of Missouri's total population, 26% of the state's white population, 77% of the black population, and 42% of the Hispanic population resides in either St. Louis City, St. Louis County, or Kansas City.)
- Of the 748 total HIV cases reported in heterosexual contacts, 387 (51.7%) were from the St. Louis HIV Region and 148 (19.8%) from the Kansas City HIV Region. The total numbers of cases reported from the Outstate HIV Regions were: Southwest, 82 cases; North Central, 41 cases; Southeast, 39 cases; and Northwest, 11 cases. In addition, 40 HIV cases in heterosexual contacts have been reported from persons residing in Missouri correctional facilities at the time of diagnosis.

Table 22. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Geographic Area, Missouri, Cumulative Through December 2001

Geographic Area	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
St. Louis City	25	(10.9%)	203	(89.0%)	0	(0.0%)	228	(100.0%)
St. Louis County	35	(26.1%)	94	(70.1%)	2	(1.5%)	134	(100.0%)
Kansas City	31	(26.5%)	80	(68.4%)	4	(3.4%)	117	(100.0%)
Outstate	157	(68.6%)	65	(28.4%)	4	(1.8%)	229	(100.0%)
Missouri Correctional Facilities	7	(17.5%)	30	(75.0%)	2	(5.0%)	40	(100.0%)
Missouri Total	255	(34.1%)	472	(63.1%)	12	(1.6%)	748	(100.0%)
HIV Region								
St. Louis Region	80	(20.7%)	301	(77.8%)	2	(0.5%)	387	(100.0%)
Kansas City Region	56	(37.8%)	85	(57.4%)	5	(3.4%)	148	(100.0%)
Northwest Region	8	(72.7%)	3	(27.2%)	0	(0.0%)	11	(100.0%)
North Central Region	23	(56.1%)	17	(41.5%)	0	(0.0%)	41	(100.0%)
Southwest Region	60	(73.2%)	18	(22.0%)	3	(3.7%)	82	(100.0%)
Southeast Region	21	(53.8%)	18	(46.2%)	0	(0.0%)	39	(100.0%)
Missouri Correctional Facilities	7	(17.5%)	30	(75.0%)	2	(5.0%)	40	(100.0%)
Missouri Total	255	(34.1%)	472	(63.1%)	12	(1.6%)	748	(100.0%)

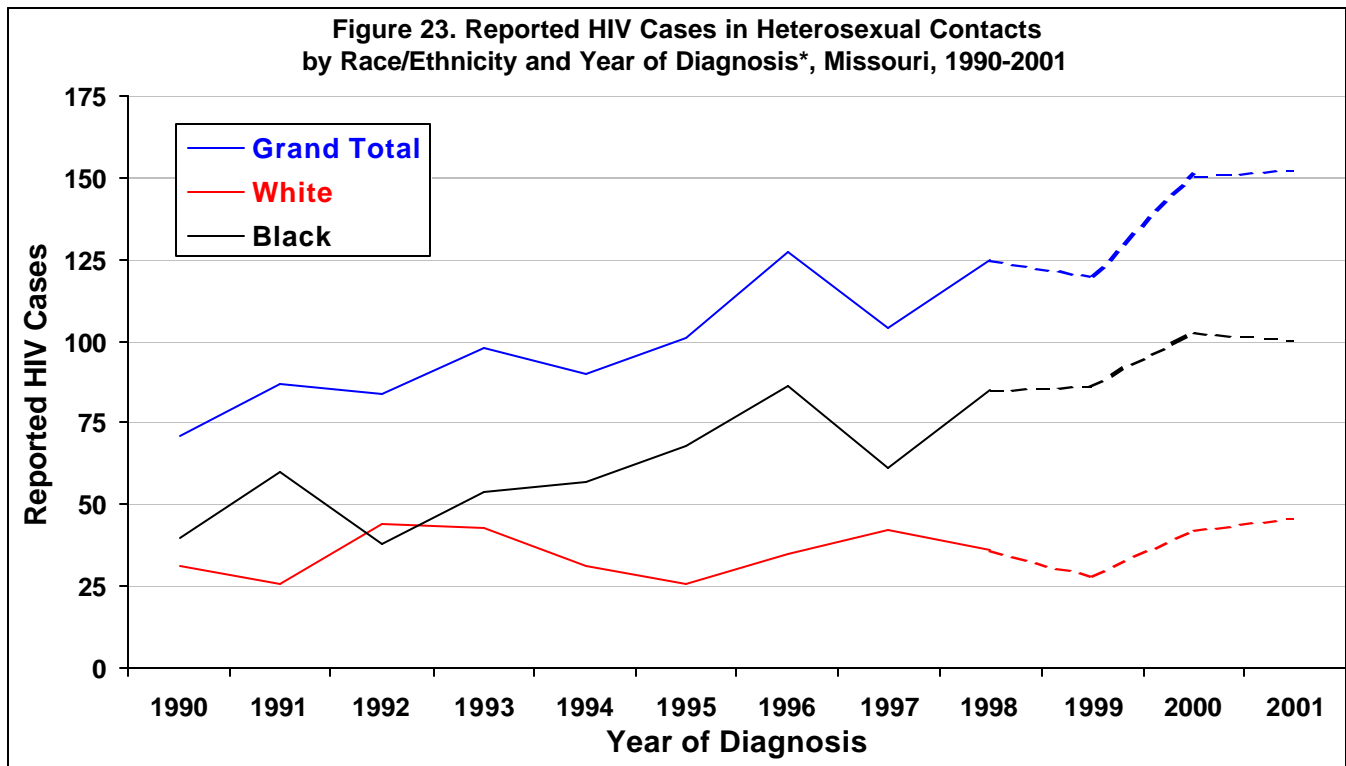
NOTE: Row percentages are shown.

Trends

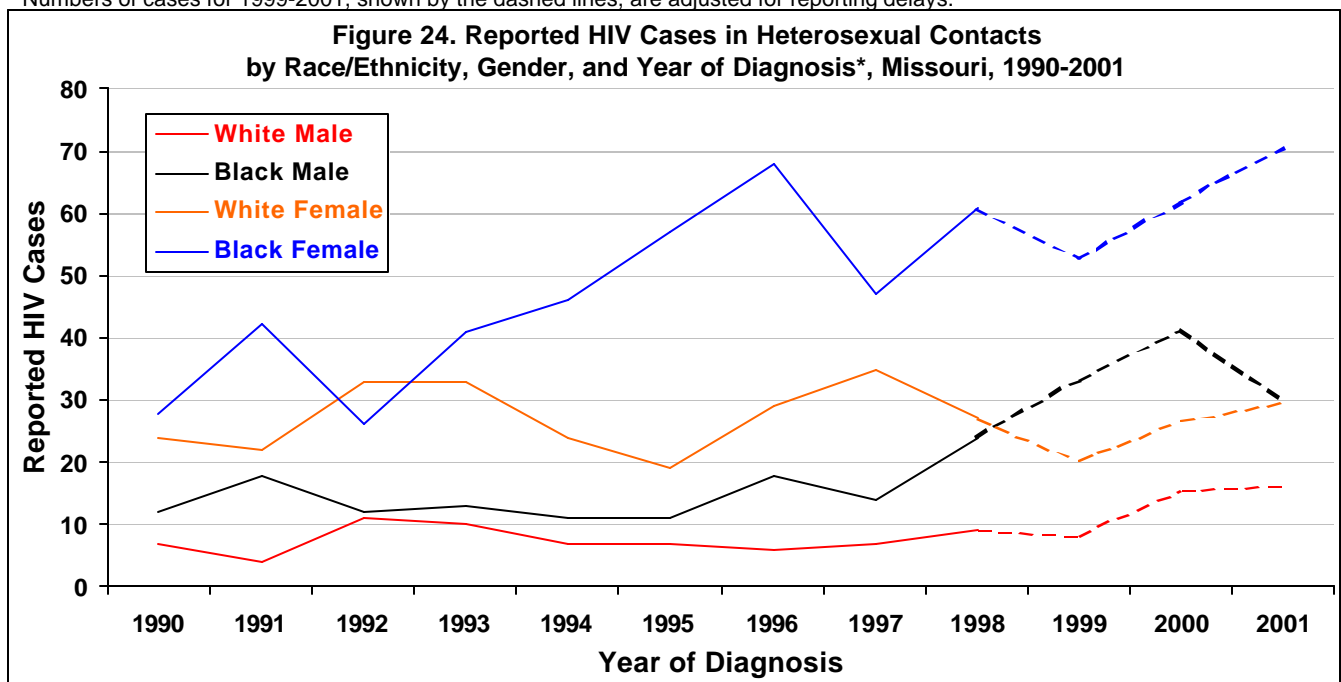
- As indicated in Table 2 (on page 20), a higher proportion of cumulative HIV cases (18.6%), compared to cumulative AIDS cases (9.3%), appear to be heterosexual contacts, providing evidence that among more recently infected persons a larger proportion are heterosexual contacts.

HIV Disease Epi Profile Summary: Missouri

- Figure 23 shows reported HIV cases[†] in heterosexual contacts by race/ethnicity and year of diagnosis.^{¶¶} Figure 24 shows reported HIV cases[†] in heterosexual contacts by race/ethnicity, gender, and year of diagnosis.^{¶¶} Since 1990, the annual number of diagnosed HIV cases in heterosexual contacts has generally been increasing. However, this general upward trend in diagnosed cases is only seen in blacks, whereas in whites the annual number of diagnosed cases has essentially remained plateaued.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

[†] See footnote on page 28. ^{¶¶} See footnote on page 28.

STD Epi Profile Summary: Missouri

Gonorrhea

Magnitude of the Problem

- During 2001, 8,723 cases of gonorrhea were reported in Missouri; the corresponding rate* was 159.5 cases per 100,000 population. Because of underdiagnosis and underreporting, the actual number of persons infected with *Neisseria gonorrhoeae* was undoubtedly much higher.
- During 2000, 8,883 cases of gonorrhea were reported in Missouri, with 358,995 cases reported nationwide (most recent U.S. data). The rate* of reported gonorrhea cases in Missouri (162.4) was approximately 1.2 times the U.S. rate* (131.6). Missouri ranked 14th among the fifty states in rates of reported gonorrhea cases in 2000.

Who

- Of the 8,723 gonorrhea cases reported in 2001, 48.0% were in males and 52.0% were in females. Among blacks, a higher proportion of cases were reported in males (52.6%) than in females (47.4%). Among whites, a much higher proportion of cases were reported in females (68.3%) than in males (31.7%).
- Of the 8,723 cases of gonorrhea reported in 2001, 6,562 (75.2%) were in blacks, 1,098 (12.6%) in whites, 20 (0.2%) in Asians, 9 (0.1%) in American Indians, and 51 (0.6%) were classified as Other. For 983 (11.3%) cases, race was not indicated.
- Among reported gonorrhea cases, blacks were very disproportionately represented. In 2001, approximately six times as many cases were reported in blacks compared to whites. The rate* of reported cases in blacks (1,074.0) was about 46 times the rate* in whites (23.4).
- Table 1 shows the numbers and rates of reported gonorrhea cases in whites and blacks for Missouri, St. Louis City and County, Kansas City, and Outstate Missouri.
- A substantial proportion of reported gonorrhea cases in females are in teenagers. In 2001, persons 13-19 years of age made up 42.9% of black female cases, 42.7% of white female cases, 20.3% of black male cases, and 14.9% of white male cases. Figure 2 shows the distribution of cases by age group for white males and females, and black males and females.

Where

- In 2001, of the 8,723 gonorrhea cases reported, 3,185 (36.5%), were from St. Louis City, 2,024 (23.2%) from Kansas City, 1,847 (21.2%) from St. Louis County, and 1,667 (19.1%) from the remainder of the state (Outstate Missouri). Cases were reported from 91 of the state's 114 counties. Figure 3 shows the number of gonorrhea cases reported from each county in 2001.
- The highest rate* of reported gonorrhea cases in 2001 was in St. Louis City (953.7), followed by Kansas City (462.3), St. Louis County (185.4), and Outstate Missouri (45.1).
- A summary of reported gonorrhea cases by county is shown in the table on page 55.

Trends

- The annual number of reported cases of gonorrhea in Missouri has remained fairly stable during the past 5 years. The 8,723 gonorrhea cases reported in 2001 represented an 1.8% decrease from the 8,883 cases reported in 2000. Figure 1 shows the trends in reported gonorrhea cases from 1985-2001 for Missouri, St. Louis City and County, Kansas City, and Outstate Missouri.
- From 2000 to 2001, reported cases of gonorrhea in St. Louis City increased by 10.6% (from 2,879 to 3,185 cases); reported St. Louis County cases increased by 6.3% (from 1,738 to 1,847 cases); reported Kansas City cases decreased by 20.5% (from 2,545 to 2,024 cases); and reported Outstate cases decreased by 3.1% (from 1,721 to 1,667 cases).

*All rates in this report are per 100,000 population.

Figure 1. Reported Gonorrhea Cases by Geographic Area and Year of Report Missouri, 1985-2001

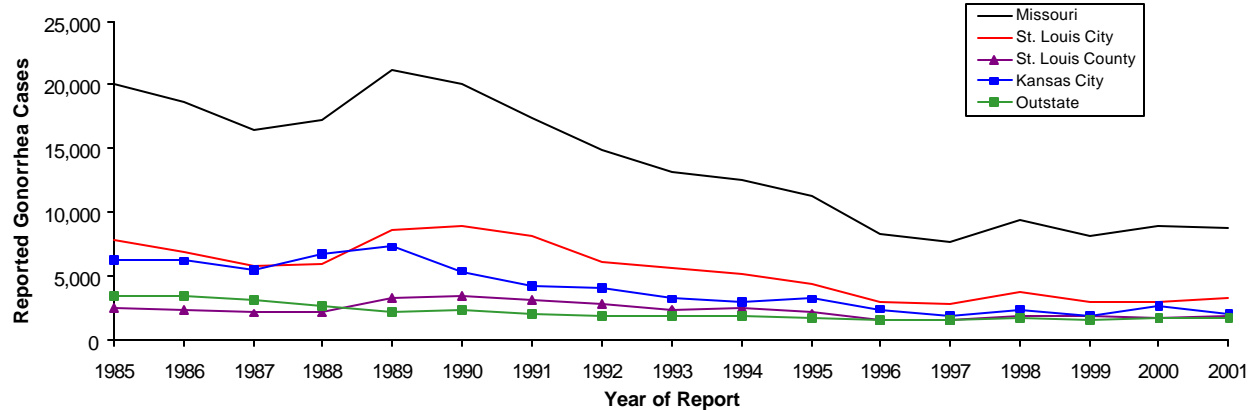


Figure 2. Reported Gonorrhea Cases by Race, Gender and Age Group Missouri, 2001

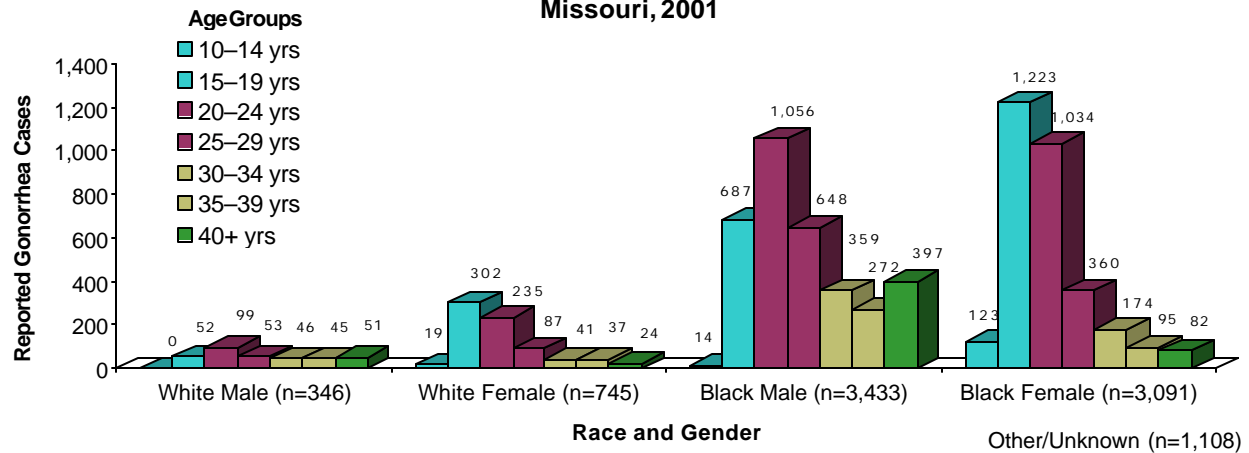
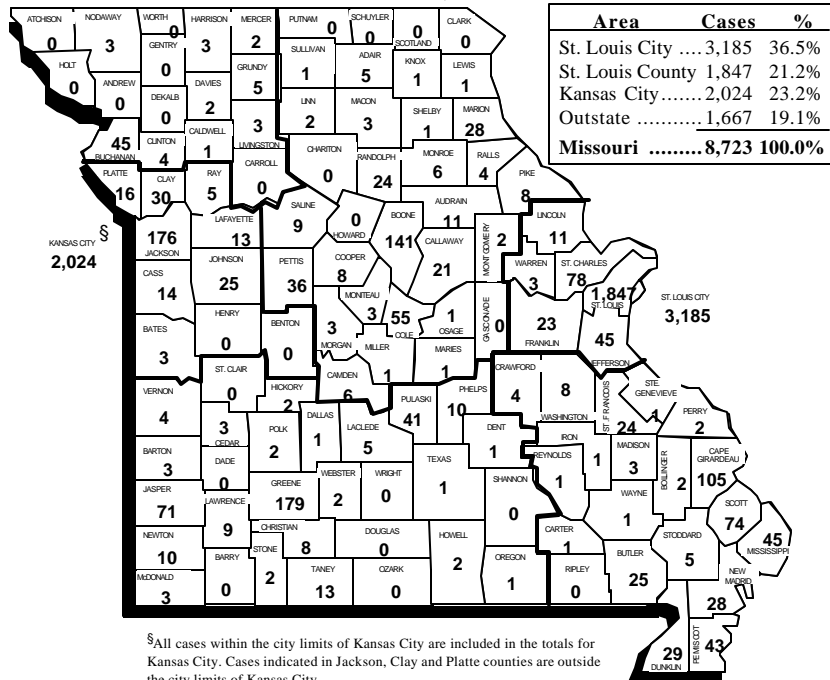


Table 1. Reported Gonorrhea Cases and Rates by Geographic Area, Missouri, 2001

	Cases	%	Rate*
Missouri			
Whites	1,098	12.6%	23.4
Blacks	6,562	75.2%	1,074.0
Other/Unknown	1,063	12.2%	--
Total Cases	8,723	100.0%	159.5
St. Louis City			
Whites	132	4.1%	89.7
Blacks	2,707	85.0%	1,535.8
Other/Unknown	346	10.9%	--
Total Cases	3,185	100.0%	953.7
St. Louis County			
Whites	120	6.5%	15.1
Blacks	1,484	80.3%	900.6
Other/Unknown	243	13.2%	--
Total Cases	1,847	100.0%	185.4
Kansas City			
Whites	181	9.0%	64.8
Blacks	1,672	82.6%	1,284.3
Other/Unknown	171	8.4%	--
Total Cases	2,024	100.0%	462.3
Outstate			
Whites	665	39.8%	19.2
Blacks	699	41.9%	500.8
Other/Unknown	303	18.2%	--
Total Cases	1,667	100.0%	45.1

*Per 100,000 population

Figure 3. Reported Gonorrhea Cases by County Missouri, 2001



Primary and Secondary (P&S) Syphilis

Magnitude of the problem

- During 2001, 26 cases of primary and secondary (P&S) syphilis were reported in Missouri; the corresponding rate* was 0.1 cases per 100,000 population. Because of underdiagnosis and underreporting, the actual number of persons recently infected with *Treponema pallidum* was likely higher than is indicated by the number of reported cases.
- During 2000, 29 cases of P&S syphilis were reported in Missouri, compared to 5,979 cases reported nationwide (most recent U.S. data). The rate* of P&S syphilis cases reported in Missouri (0.5) was less than the U.S. rate* (2.2). Missouri ranked 19th among the fifty states in rates of reported P&S syphilis cases in 2000.

Who

- Of the 26 P&S syphilis cases reported in 2001, 69.2% were in males and 30.8% were in females.
- Of the 26 cases of P&S syphilis reported in 2001, 19 (73.1%) were in blacks, 5 (19.2%) in whites, and 2 (7.7%) were classified as Other/Unknown.
- Blacks are disproportionately represented among reported P&S syphilis cases. The rate* for cases reported in 2001 in blacks (3.1) was approximately 31 times the rate* for cases in whites (0.1).
- Table 1 shows the numbers and rates of reported P&S syphilis cases in whites and blacks for Missouri, St. Louis City and County, Kansas City, and Outstate Missouri.
- The average age at time of diagnosis is higher for reported cases of P&S syphilis as compared to reported cases of chlamydia or gonorrhea. For reported cases of P&S syphilis in males during 2001, the largest proportion of cases (33.3%) were in the 40+ age group. For females, the largest proportion of cases (37.5%) were found in the 25-29 age group; 50.0% of reported cases were in women 35 years of age and older. Figure 2 shows the distribution of cases by age group for white males and females, and black males and females.

Where

- Of the 26 P&S syphilis cases reported in 2001, 15 (57.7%) were from St. Louis City, 5 (19.2%) from Kansas City, 5 (19.2%) from Outstate Missouri, and 1 (3.8%) from St. Louis County. Cases were reported from only 7 of the state's 114 counties. Figure 3 shows the number of P&S syphilis cases reported from each county in 2001.
- The highest rate* of reported P&S syphilis cases in 2001 was in St. Louis City (4.5), followed by Kansas City (1.1), St. Louis County (0.1) and Outstate Missouri (0.1).
- A summary of reported P&S syphilis cases by county is shown in the table on page 56.

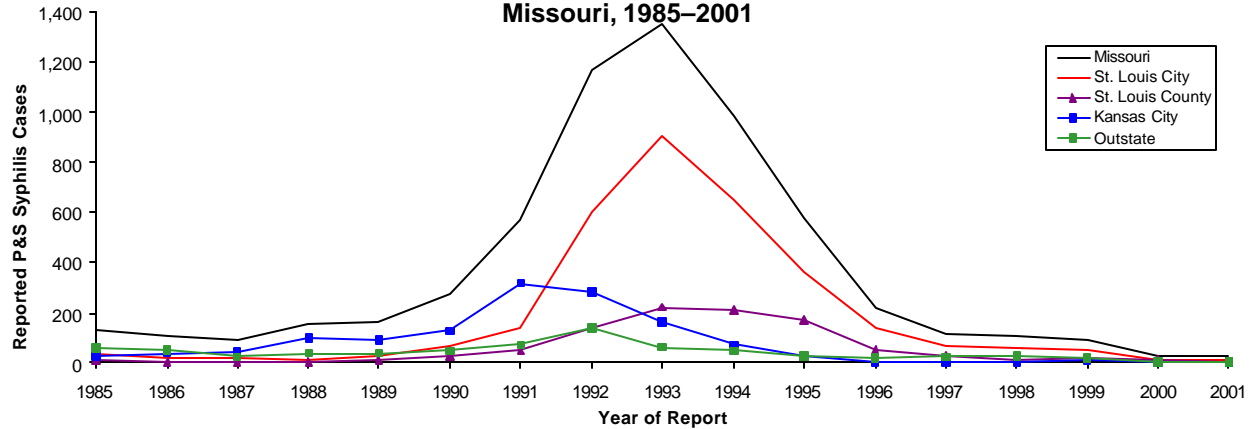
Trends

- Since 1993, when a syphilis outbreak in the St. Louis area was at its height, the annual number of reported cases of P&S syphilis in Missouri has been decreasing. The 26 cases reported in 2001 represented a 10.3% decline from the 29 cases reported in 2000. Figure 1 shows the trends in reported P&S syphilis cases from 1985-2001 for Missouri, St. Louis City and County, Kansas City, and Outstate Missouri.
- From 2000 to 2001, reported cases of P&S syphilis decreased by 91.7% (from 12 to 1 cases) in St. Louis County. Reported cases from St. Louis City increased by 36.4% (from 11 to 15 cases); reported Outstate cases remained the same (5 cases), and reported Kansas City cases increased by 400.0% (from 1 to 5 cases).

Note: In addition to the 26 cases of P&S syphilis reported in 2001, 33 cases of early latent (duration of less than one year) syphilis were reported in Missouri residents (see pages 42-43), and 5 congenital syphilis cases were reported.

*All rates in this report are per 100,000 population.

**Figure 1. Reported P&S Syphilis Cases by Geographic Area and Year of Report
Missouri, 1985–2001**



**Figure 2. Reported P&S Syphilis Cases by Race, Gender and Age Group
Missouri, 2001**

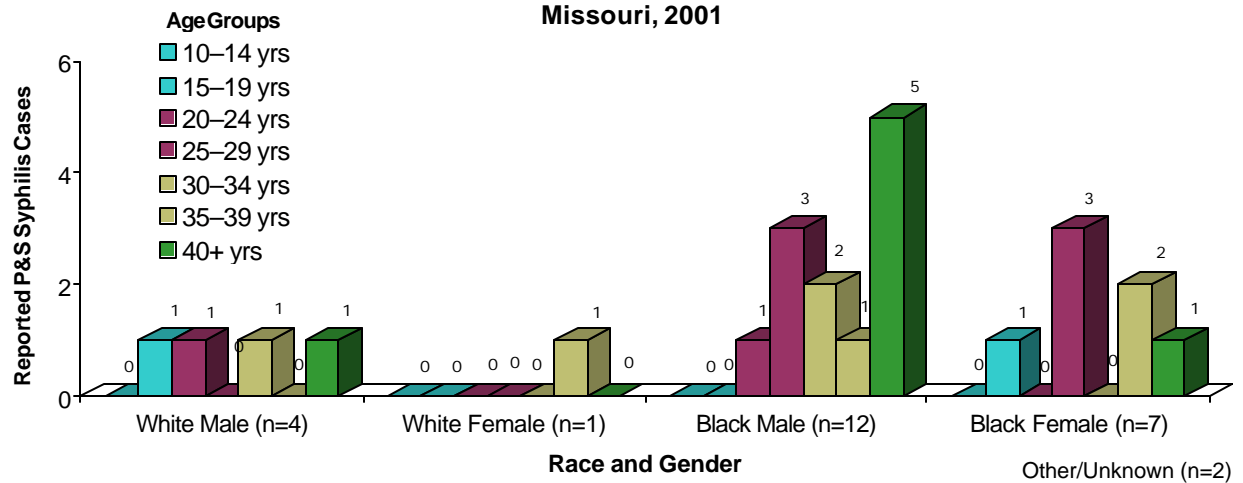
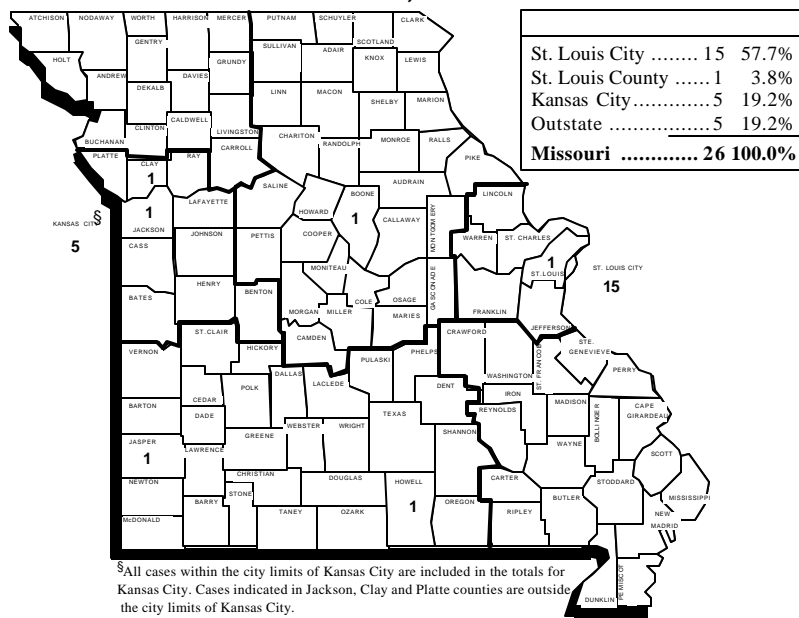


Table 1. Reported P&S Syphilis Cases and Rates by Geographic Area, Missouri, 2001

	Cases	%	Rate*
Missouri			
Whites	5	19.2%	0.1
Blacks	19	73.1%	3.1
Other/Unknown	2	7.7%	--
Total Cases	26	100.0%	0.5
St. Louis City			
Whites	1	6.7%	0.7
Blacks	14	93.3%	7.9
Other/Unknown	0	0.0%	--
Total Cases	15	100.0%	4.5
St. Louis County			
Whites	0	0.0%	0.0
Blacks	0	0.0%	0.0
Other/Unknown	1	100.0%	--
Total Cases	1	100.0%	0.1
Kansas City			
Whites	2	28.6%	0.7
Blacks	3	57.1%	2.3
Other/Unknown	0	14.3%	--
Total Cases	5	100.0%	1.1
Outstate			
Whites	2	40.0%	0.1
Blacks	2	40.0%	1.4
Other/Unknown	1	20.0%	--
Total Cases	5	100.0%	0.1

*Per 100,000 population

**Figure 3. Reported P&S Syphilis Cases by County
Missouri, 2001**



^aAll cases within the city limits of Kansas City are included in the totals for Kansas City. Cases indicated in Jackson, Clay and Platte counties are outside the city limits of Kansas City.

Congenital Syphilis: 5 Congenital Syphilis cases were reported in 2001

5 (100.0%) African American

4 (80.0%) St. Louis City

1 (10.0%) St. Louis County

STD Epi Profile Summary: Missouri

Early Latent Syphilis

Magnitude of the problem

- During 2001, 33 cases of early latent (duration of less than one year) syphilis were reported in Missouri; the corresponding rate* was 0.6 cases per 100,000 population.
- During 2000, 52 cases of early latent syphilis were reported in Missouri, compared to 9,470 cases reported nationwide (most recent U.S. data). The rate* of early latent syphilis cases reported in Missouri (1.0) was less than the U.S. rate* (3.5).

Who

- Of the 33 early latent syphilis cases reported in 2001, 51.5% were in males and 48.5% were in females.
- Of the 33 cases of early latent syphilis reported in 2001, 26 (78.8%) were in blacks, and 7 (21.2%) in whites. Table 1 shows the numbers and percentages of reported early latent syphilis cases in whites and blacks for Missouri, St. Louis City and County, Kansas City, and Outstate Missouri.
- Blacks are disproportionately represented among reported early latent syphilis cases. The rate* for cases reported in 2001 in blacks (4.3) was approximately 43 times the rate* for cases in whites (0.1).
- Table 1 shows the numbers and rates of reported early latent syphilis cases in whites and blacks for Missouri, St. Louis City and County, Kansas City, and Outstate Missouri.
- The average age at time of diagnosis is higher for reported cases of early latent syphilis as compared to reported cases of chlamydia or gonorrhea. For reported cases of early latent syphilis in males during 2001, the largest proportion of cases (29.4%) were in the 30-34 and 40+ age groups. For females, the largest proportion of cases (18.8%) were in the 20-24 age group. However, 37.5% of all female cases were in women 30 years of age and older. Figure 2 shows the distribution of cases by age group for white males and females, and black males and females.

Where

- Of the 33 early latent syphilis cases reported in 2001, 15 (45.5%), were from St. Louis City, followed by 6 (18.2%) from St. Louis County, 10 (30.3%) from Outstate Missouri, and 2 (6.1%) from Kansas City. Cases were reported from only 10 of the state's 114 counties. Figure 3 shows the number of early latent syphilis cases reported from each county in 2001.
- The highest rate* of reported early latent syphilis cases in 2001 was in St. Louis City (4.5), followed by St. Louis County (0.6), Kansas City (0.5), and Outstate Missouri (0.3).
- A summary of reported early latent syphilis cases by county is shown in the table on page 57.

Trends

- Since 1993, when a syphilis outbreak in the St. Louis area was at its height, the annual number of reported cases of early latent syphilis in Missouri has been decreasing. The 33 cases reported in 2001 represented a 36.5% decline from the 52 cases reported in 2000. Figure 1 shows the trends in reported early latent syphilis cases from 1992-2001 for Missouri, St. Louis City and County, Kansas City, and Outstate Missouri.
- From 2000 to 2001, reported cases of early latent syphilis decreased by 28.6% (from 21 to 15 cases) in St. Louis City; reported cases from St. Louis County decreased by 60.0% (from 15 to 6 cases); reported Outstate cases decreased by 9.1% (from 11 to 10 cases); and reported Kansas City cases decreased by 60.0% (from 5 to 2 cases).

Note: In addition to the 33 cases of early latent syphilis reported in 2001, 26 cases of P&S syphilis were reported in Missouri residents (see pages 40-41), and 5 congenital syphilis cases were reported.

*All rates in this report are per 100,000 population.

Figure 1. Reported Early Latent Syphilis Cases by Geographic Area and Year of Report Missouri, 1992–2001

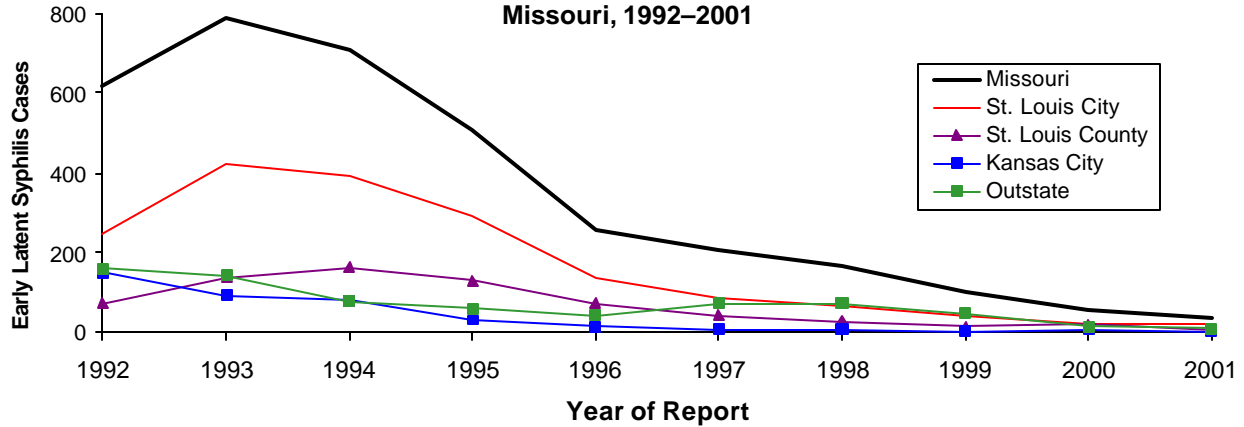


Figure 2. Reported Early Latent Syphilis Cases by Race, Gender and Age Group Missouri, 2001

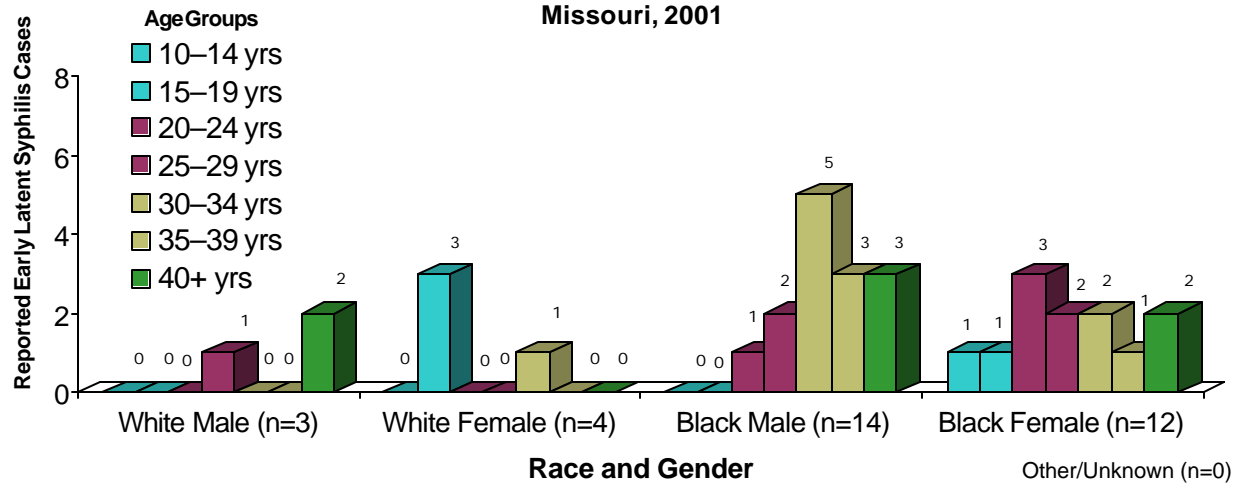
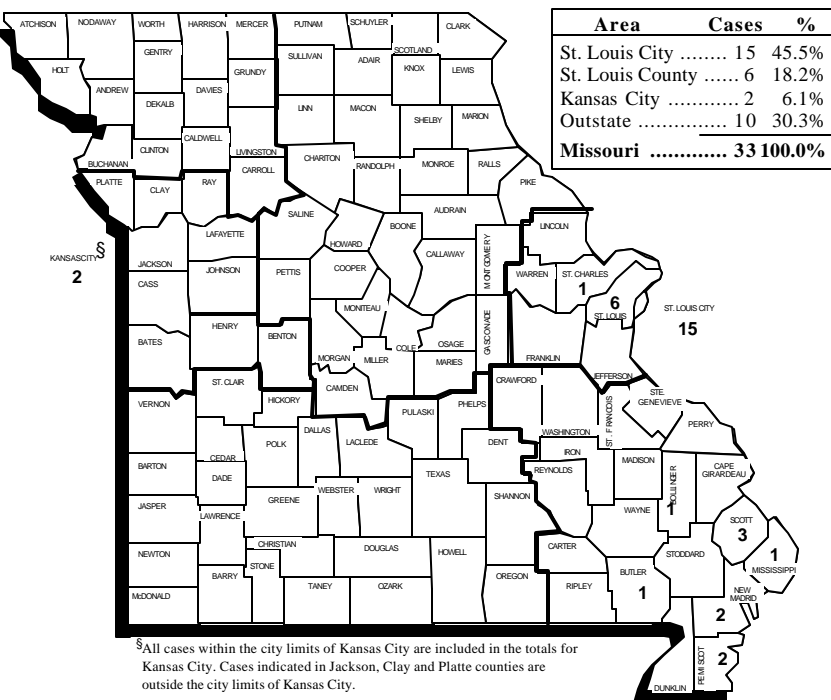


Table 1. Reported Early Latent Syphilis Cases and Rates by Geographic Area, Missouri, 2001

	Cases	%	Rate*
Missouri			
Whites	7	21.2%	0.1
Blacks	26	78.8%	4.3
Other/Unknown	0	0.0%	--
Total Cases	33	100.0%	0.6
St. Louis City			
Whites	1	6.7%	0.7
Blacks	14	93.3%	7.9
Other/Unknown	0	0.0%	--
Total Cases	15	100.0%	4.5
St. Louis County			
Whites	0	0.0%	0.0
Blacks	6	100.0%	3.6
Other/Unknown	0	0.0%	--
Total Cases	6	100.0%	0.6
Kansas City			
Whites	1	50.0%	0.4
Blacks	1	50.0%	0.1
Other/Unknown	0	0.0%	--
Total Cases	2	100.0%	0.5
Outstate			
Whites	5	50.0%	0.1
Blacks	5	50.0%	3.6
Other/Unknown	0	0.0%	--
Total Cases	10	100.0%	0.3

*Per 100,000 population

Figure 3. Reported Early Latent Syphilis Cases by County Missouri, 2001



Chlamydia

Magnitude of the problem

- During 2001, 13,949 cases of chlamydia were reported in Missouri; the corresponding rate* was 255.1 cases per 100,000 population. Because of underdiagnosis (note that chlamydial infection frequently occurs without noticeable signs/symptoms) and underreporting, the actual number of persons infected with *Chlamydia trachomatis* was undoubtedly much higher.
- During 2000, 13,450 cases of chlamydia were reported in Missouri, with 702,093 cases reported nationwide (most recent U.S. data). The rate* of reported chlamydia cases in Missouri (245.9) was slightly lower than the U.S. rate* (257.5). Missouri ranked 24th among the fifty states in rates of reported chlamydia cases in 2000.

Who

- Of total chlamydia cases reported in 2001, the substantial majority were in females (85.0%). This reflects the selective screening of females for chlamydia undertaken by the Missouri Infertility Prevention Project (MIPP). If similar widespread screening of males were also undertaken, it is expected that the number of diagnosed and reported cases in males would be much higher than is currently seen.
- Of the 13,949 cases of chlamydia reported in 2001, 6,400 (45.9%) cases were known to have occurred in blacks, 4,563 (32.7%) in whites, 86 (0.6%) in Asians, and 12 (0.1%) in American Indians; in addition, 214 (1.5%) cases were classified as Other. For 2,674 (19.2%) cases, race was not indicated.
- Blacks are disproportionately represented among reported chlamydia cases. The rate* for cases reported in 2001 in blacks (1,047.5) was approximately 11 times the rate* for cases in whites (97.3).
- Table 1 shows the numbers and rates of reported chlamydia cases in whites and blacks for Missouri, St. Louis City and County, Kansas City, and Outstate Missouri.
- In 2001, 46.4% of reported chlamydia cases in females were in teenagers. Persons 13-19 years of age made up 48.2% of white female cases, 46.8% of black female cases, 36.4% of black male cases, and 20.5% of white male cases. Figure 2 shows the distribution of cases by age group for white males and females, and black males and females.

Where

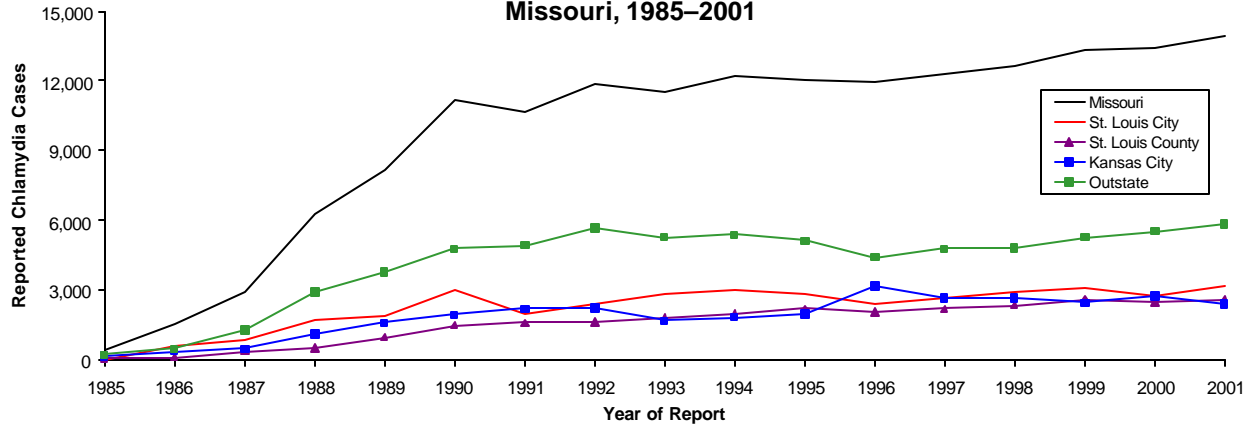
- Of the 13,949 chlamydia cases reported in 2001, the largest number, 5,827 (41.8%), were from Outstate Missouri, followed by 3,195 (22.9%) from St. Louis City, 2,560 (18.4%) from St. Louis County, and 2,367 (17.0%) from Kansas City.
- The highest rate* of reported cases in 2001 was in St. Louis City (956.7), followed by Kansas City (540.7), St. Louis County (257.0), and Outstate Missouri (157.5).
- Figure 3 shows the number of chlamydia cases reported from each county in 2001. Only two counties in Missouri did not report at least one chlamydia case in 2001.
- A summary of reported chlamydia cases by county is shown in the table on page 58.

Trends

- In 2001, the 13,949 reported cases of chlamydia represented a 3.7% increase from the 13,450 cases reported in 2000. Figure 1 shows the trends in reported chlamydia cases from 1985-2001 for Missouri, St. Louis City and County, Kansas City, and Outstate Missouri.
- From 2000 to 2001, reported cases of chlamydia in St. Louis City increased by 17.8% (from 2,712 to 3,195 cases), reported Outstate cases increased by 5.9% (from 5,501 to 5,827 cases), and reported St. Louis County cases increased by 2.8% (from 2,490 to 2,560 cases). Reported Kansas City cases decreased by 13.8% (from 2,747 to 2,367 cases)

*All rates in this report are per 100,000 population.

**Figure 1. Reported Chlamydia Cases by Geographic Area and Year of Report
Missouri, 1985–2001**



**Figure 2. Reported Chlamydia Cases by Race, Gender and Age Group
Missouri, 2001**

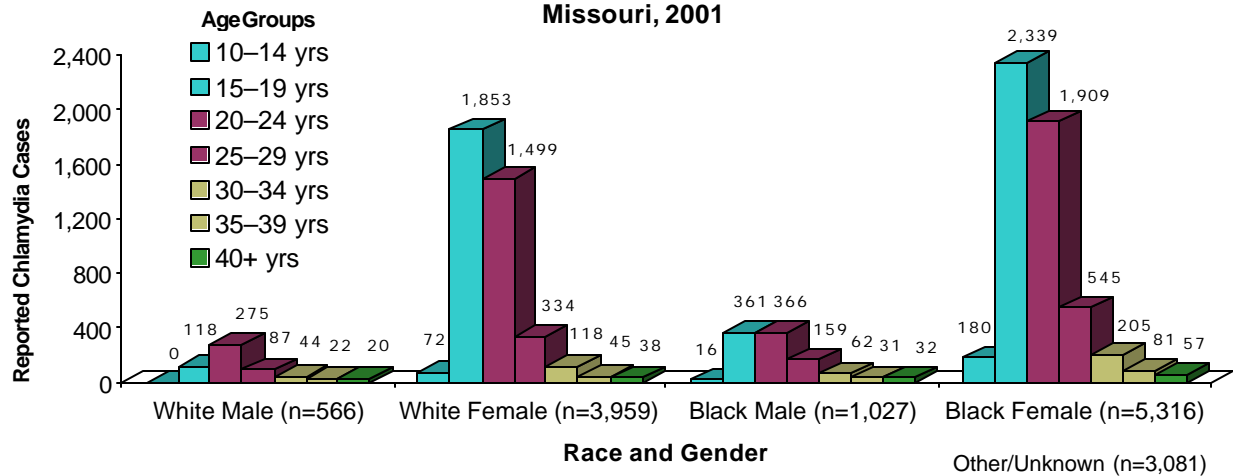
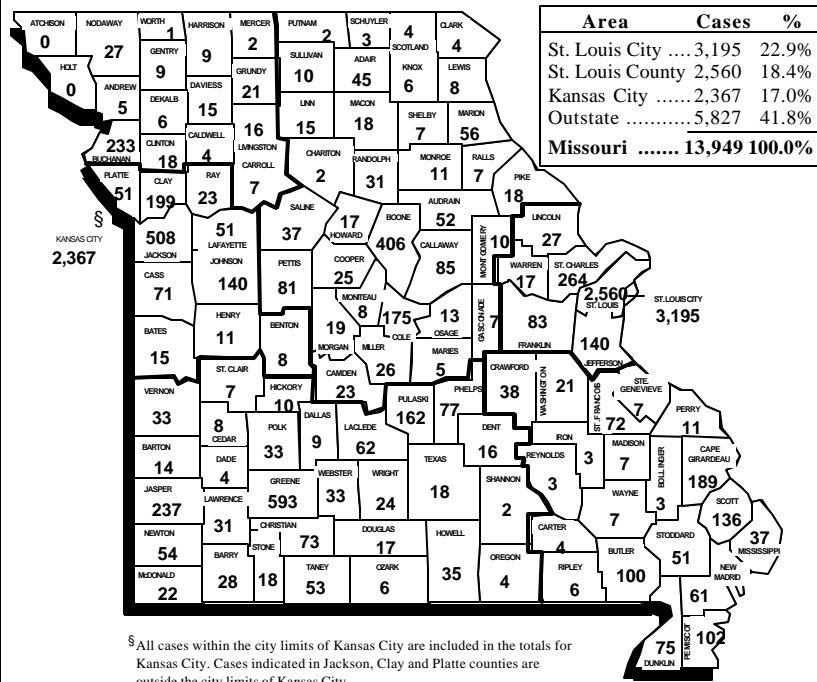


Table 1. Reported Chlamydia Cases and Rates by Geographic Area, Missouri, 2001

	Cases	%	Rate*
Missouri			
Whites	4,563	32.7%	97.3
Blacks	6,400	45.9%	1,047.5
Other/Unknown	2,986	21.4%	--
Total Cases	13,949	100.0%	255.1
St. Louis City			
Whites	162	5.1%	110.1
Blacks	2,333	73.0%	1,323.6
Other/Unknown	700	21.9%	--
Total Cases	3,195	100.0%	956.7
St. Louis County			
Whites	338	13.2%	42.4
Blacks	1,662	64.9%	1,008.6
Other/Unknown	560	21.9%	--
Total Cases	2,560	100.0%	257.0
Kansas City			
Whites	458	19.3%	164.0
Blacks	1,453	61.4%	1,116.1
Other/Unknown	456	21.9%	--
Total Cases	2,367	100.0%	540.7
Outstate			
Whites	3,607	61.9%	104.1
Blacks	955	16.4%	683.3
Other/Unknown	1,265	21.7%	--
Total Cases	5,827	100.0%	157.5

*Per 100,000 population

**Figure 3. Reported Chlamydia Cases by County
Missouri, 2001**



§ All cases within the city limits of Kansas City are included in the totals for Kansas City. Cases indicated in Jackson, Clay and Platte counties are outside the city limits of Kansas City.

STD Epi Profile Summary: Missouri

Summary of Reported Gonorrhea Cases by County Missouri, Five-Year Median (1997-2001), 2000, 2001

County	Five-Year Median	2000	2001	% Change 2000-2001	2001 Rate*
Adair	3	2	5	150.0%	20.7
Andrew	1	1	0	-100.0%	0.0
Atchison	0	0	0	0.0%	0.0
Audrain	18	18	11	-38.9%	46.9
Barry	2	3	0	-100.0%	0.0
Barton	2	1	3	200.0%	24.7
Bates	1	1	3	200.0%	18.7
Benton	2	3	0	-100.0%	0.0
Bollinger	2	2	2	0.0%	16.9
Boone	233	233	141	-39.5%	108.3
Buchanan	57	57	45	-21.1%	55.1
Butler	27	27	25	-7.4%	61.9
Caldwell	0	0	1	100.0%	11.2
Callaway	28	27	21	-22.2%	55.4
Camden	6	0	6	600.0%	17.3
Cape Girardeau	108	108	105	-2.8%	156.3
Carroll	1	1	0	-100.0%	0.0
Carter	0	0	1	100.0%	15.9
Cass	14	14	14	0.0%	16.8
Cedar	2	3	3	0.0%	22.4
Chariton	1	5	0	-100.0%	0.0
Christian	8	11	8	-27.3%	15.6
Clark	0	1	0	-100.0%	0.0
Clay**	31	31	30	-3.2%	28.5
Clinton	4	2	4	100.0%	20.5
Cole	75	75	55	-26.7%	79.1
Cooper	6	6	8	33.3%	49.5
Crawford	4	1	4	300.0%	17.8
Dade	1	1	0	-100.0%	0.0
Dallas	1	3	1	-66.7%	6.4
Daviess	1	1	2	100.0%	24.8
DeKalb	0	1	0	-100.0%	0.0
Dent	2	1	1	0.0%	7.0
Douglas	0	0	0	0.0%	0.0
Dunklin	29	29	29	0.0%	89.2
Franklin	15	16	23	43.8%	24.7
Gasconade	1	1	0	-100.0%	0.0
Gentry	0	1	0	-100.0%	0.0
Greene	119	188	179	-4.8%	78.9
Grundy	0	0	5	500.0%	49.3
Harrison	2	0	3	300.0%	35.7
Henry	1	1	0	-100.0%	0.0
Hickory	1	0	2	200.0%	22.9
Holt	0	3	0	-100.0%	0.0
Howard	0	1	0	-100.0%	0.0
Howell	2	2	2	0.0%	5.5
Iron	0	0	1	100.0%	9.1
Jackson**	163	193	176	-8.8%	55.1
Jasper	70	80	71	-11.3%	70.8
Jefferson	28	28	45	60.7%	22.7
Johnson	25	20	25	25.0%	52.0
Kansas City	2,024	2,545	2,024	-20.5%	462.3
Knox	1	2	1	0.0%	0.0
Laclede	5	5	5	0.0%	15.9
Lafayette	8	8	13	62.5%	39.6
Lawrence	3	2	9	350.0%	26.9
Lewis	2	4	1	-75.0%	9.8
Lincoln	4	8	11	37.5%	29.2
Linn	2	2	2	0.0%	14.4

County	Five-Year Median	2000	2001	% Change 2000-2001	2001 Rate*
Livingston	1	0	3	300.0%	21.4
Macon	3	11	3	-72.7%	19.4
Madison	0	0	3	300.0%	25.8
Maries	0	0	1	100.0%	11.9
Marion	18	18	28	55.6%	101.0
McDonald	3	3	3	0.0%	14.9
Mercer	0	0	2	200.0%	50.6
Miller	2	5	1	-80.0%	4.4
Mississippi	42	38	45	18.4%	337.4
Moniteau	2	2	3	50.0%	22.5
Monroe	2	0	6	600.0%	65.7
Montgomery	1	0	2	200.0%	16.5
Morgan	2	2	3	50.0%	15.9
New Madrid	34	46	28	-39.1%	140.5
Newton	10	14	10	-28.6%	20.1
Nodaway	3	2	3	50.0%	14.6
Oregon	1	1	1	0.0%	9.7
Osage	2	1	1	0.0%	8.0
Ozark	0	1	0	-100.0%	0.0
Pemiscot	49	58	43	-25.9%	203.3
Perry	2	2	2	0.0%	11.5
Pettis	13	8	36	350.0%	97.0
Phelps	8	8	10	25.0%	25.7
Pike	8	3	8	166.7%	48.7
Platte**	13	14	16	14.3%	36.5
Polk	3	4	2	-50.0%	7.8
Pulaski	35	30	41	36.7%	107.2
Putnam	0	0	0	0.0%	0.0
Ralls	4	4	4	0.0%	43.6
Randolph	10	10	24	140.0%	100.6
Ray	3	1	5	400.0%	21.0
Reynolds	1	0	1	100.0%	15.1
Ripley	0	0	0	0.0%	0.0
Saline	14	14	9	-35.7%	39.5
Schuyler	0	0	0	0.0%	0.0
Scotland	0	2	0	0.0%	0.0
Scott	74	74	74	0.0%	182.4
Shannon	0	1	0	-100.0%	0.0
Shelby	2	3	1	-66.7%	15.0
St. Charles	58	56	78	39.3%	27.8
St. Clair	1	2	0	-100.0%	0.0
St. Francois	8	4	24	500.0%	43.0
St. Louis City	2,879	2,879	3,185	10.6%	953.7
St. Louis	1,764	1,738	1,847	6.3%	185.4
Ste. Genevieve	1	1	1	0.0%	5.7
Stoddard	5	7	5	-28.6%	16.9
Stone	1	1	2	100.0%	7.3
Sullivan	1	1	1	0.0%	14.6
Taney	7	7	13	85.7%	36.6
Texas	1	7	1	-85.7%	4.5
Vernon	4	3	4	33.3%	20.5
Warren	3	2	3	50.0%	11.8
Washington	6	9	8	-11.1%	34.3
Wayne	0	0	1	100.0%	7.7
Webster	3	3	2	-33.3%	6.7
Worth	0	0	0	0.0%	0.0
Wright	1	4	0	-100.0%	0.0
Missouri	8,723	8,883	8,723	-1.8%	159.5

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

**Outside the city limits of Kansas City.

STD Epi Profile Summary: Missouri

Summary of Reported P&S Syphilis Cases by County Missouri, Five-Year Median (1997-2001), 2000, 2001

County	Five-Year Median	2000	2001	% Change 2000-2001	2001 Rate*
Adair	0	0	0	0.0%	0.0
Andrew	0	0	0	0.0%	0.0
Atchison	0	0	0	0.0%	0.0
Audrain	0	0	0	0.0%	0.0
Barry	0	0	0	0.0%	0.0
Barton	0	0	0	0.0%	0.0
Bates	0	0	0	0.0%	0.0
Benton	0	0	0	0.0%	0.0
Bollinger	0	0	0	0.0%	0.0
Boone	1	1	1	0.0%	0.8
Buchanan	0	0	0	0.0%	0.0
Butler	1	0	0	0.0%	0.0
Caldwell	0	0	0	0.0%	0.0
Callaway	1	1	0	-100.0%	0.0
Camden	0	0	0	0.0%	0.0
Cape Girardeau	0	0	0	0.0%	0.0
Carroll	0	0	0	0.0%	0.0
Carter	0	0	0	0.0%	0.0
Cass	0	0	0	0.0%	0.0
Cedar	0	0	0	0.0%	0.0
Chariton	0	0	0	0.0%	0.0
Christian	0	0	0	0.0%	0.0
Clark	0	0	0	0.0%	0.0
Clay**	0	0	1	100.0%	1.0
Clinton	0	0	0	0.0%	0.0
Cole	0	0	0	0.0%	0.0
Cooper	0	0	0	0.0%	0.0
Crawford	0	0	0	0.0%	0.0
Dade	0	0	0	0.0%	0.0
Dallas	0	0	0	0.0%	0.0
Daviess	0	0	0	0.0%	0.0
DeKalb	0	0	0	0.0%	0.0
Dent	0	0	0	0.0%	0.0
Douglas	0	0	0	0.0%	0.0
Dunklin	0	0	0	0.0%	0.0
Franklin	0	0	0	0.0%	0.0
Gasconade	0	0	0	0.0%	0.0
Gentry	0	0	0	0.0%	0.0
Greene	0	0	0	0.0%	0.0
Grundy	0	0	0	0.0%	0.0
Harrison	0	0	0	0.0%	0.0
Henry	0	0	0	0.0%	0.0
Hickory	0	0	0	0.0%	0.0
Holt	0	0	0	0.0%	0.0
Howard	0	0	0	0.0%	0.0
Howell	0	0	1	100.0%	2.8
Iron	0	0	0	0.0%	0.0
Jackson**	0	0	1	100.0%	0.3
Jasper	0	0	1	100.0%	1.0
Jefferson	0	0	0	0.0%	0.0
Johnson	0	0	0	0.0%	0.0
Kansas City	5	1	5	400.0%	1.1
Knox	0	0	0	0.0%	0.0
Laclede	0	0	0	0.0%	0.0
Lafayette	0	0	0	0.0%	0.0
Lawrence	0	0	0	0.0%	0.0
Lewis	0	0	0	0.0%	0.0
Lincoln	0	0	0	0.0%	0.0
Linn	0	0	0	0.0%	0.0

County	Five-Year Median	2000	2001	% Change 2000-2001	2001 Rate*
Livingston	0	0	0	0.0%	0.0
Macon	0	0	0	0.0%	0.0
Madison	0	0	0	0.0%	0.0
Maries	0	0	0	0.0%	0.0
Marion	0	0	0	0.0%	0.0
McDonald	0	0	0	0.0%	0.0
Mercer	0	0	0	0.0%	0.0
Miller	0	0	0	0.0%	0.0
Mississippi	1	1	0	-100.0%	0.0
Moniteau	0	0	0	0.0%	0.0
Monroe	0	0	0	0.0%	0.0
Montgomery	0	0	0	0.0%	0.0
Morgan	0	0	0	0.0%	0.0
New Madrid	0	0	0	0.0%	0.0
Newton	0	0	0	0.0%	0.0
Nodaway	0	0	0	0.0%	0.0
Oregon	0	0	0	0.0%	0.0
Osage	0	0	0	0.0%	0.0
Ozark	0	0	0	0.0%	0.0
Pemiscot	0	1	0	-100.0%	0.0
Perry	0	0	0	0.0%	0.0
Pettis	0	0	0	0.0%	0.0
Phelps	0	0	0	0.0%	0.0
Pike	0	0	0	0.0%	0.0
Platte**	0	0	0	0.0%	0.0
Polk	0	0	0	0.0%	0.0
Pulaski	0	0	0	0.0%	0.0
Putnam	0	0	0	0.0%	0.0
Ralls	0	0	0	0.0%	0.0
Randolph	0	0	0	0.0%	0.0
Ray	0	0	0	0.0%	0.0
Reynolds	0	0	0	0.0%	0.0
Ripley	0	0	0	0.0%	0.0
Saline	0	0	0	0.0%	0.0
Schuyler	0	0	0	0.0%	0.0
Scotland	0	0	0	0.0%	0.0
Scott	2	0	0	0.0%	0.0
Shannon	0	0	0	0.0%	0.0
Shelby	0	0	0	0.0%	0.0
St. Charles	1	1	0	-100.0%	0.0
St. Clair	0	0	0	0.0%	0.0
St. Francois	0	0	0	0.0%	0.0
St. Louis City	51	11	15	36.4%	4.5
St. Louis	15	12	1	-91.7%	0.1
Ste. Genevieve	0	0	0	0.0%	0.0
Stoddard	0	0	0	0.0%	0.0
Stone	0	0	0	0.0%	0.0
Sullivan	0	0	0	0.0%	0.0
Taney	0	0	0	0.0%	0.0
Texas	0	0	0	0.0%	0.0
Vernon	0	0	0	0.0%	0.0
Warren	0	0	0	0.0%	0.0
Washington	0	0	0	0.0%	0.0
Wayne	0	0	0	0.0%	0.0
Webster	0	0	0	0.0%	0.0
Worth	0	0	0	0.0%	0.0
Wright	0	0	0	0.0%	0.0
Missouri	96	29	26	-10.3%	0.5

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

**Outside the city limits of Kansas City.

STD Epi Profile Summary: Missouri

Summary of Reported Early Latent Syphilis Cases by County Missouri, Five-Year Median (1997-2001), 2000, 2001

County	Five-Year Median	2000	2001	% Change 2000-2001	2001 Rate*
Adair	0	0	0	0.0%	0.0
Andrew	0	0	0	0.0%	0.0
Atchison	0	0	0	0.0%	0.0
Audrain	0	0	0	0.0%	0.0
Barry	0	0	0	0.0%	0.0
Barton	0	0	0	0.0%	0.0
Bates	0	0	0	0.0%	0.0
Benton	0	0	0	0.0%	0.0
Bollinger	0	0	1	100.0%	8.5
Boone	1	0	0	0.0%	0.0
Buchanan	0	0	0	0.0%	0.0
Butler	1	1	1	0.0%	2.5
Caldwell	0	0	0	0.0%	0.0
Callaway	1	1	0	-100.0%	0.0
Camden	0	0	0	0.0%	0.0
Cape Girardeau	1	0	0	0.0%	0.0
Carroll	0	0	0	0.0%	0.0
Carter	0	0	0	0.0%	0.0
Cass	0	0	0	0.0%	0.0
Cedar	0	0	0	0.0%	0.0
Chariton	0	0	0	0.0%	0.0
Christian	0	0	0	0.0%	0.0
Clark	0	0	0	0.0%	0.0
Clay**	1	1	0	-100.0%	0.0
Clinton	0	0	0	0.0%	0.0
Cole	0	0	0	0.0%	0.0
Cooper	0	0	0	0.0%	0.0
Crawford	0	0	0	0.0%	0.0
Dade	0	0	0	0.0%	0.0
Dallas	0	0	0	0.0%	0.0
Daviess	0	0	0	0.0%	0.0
DeKalb	0	0	0	0.0%	0.0
Dent	0	0	0	0.0%	0.0
Douglas	0	0	0	0.0%	0.0
Dunklin	1	0	0	0.0%	0.0
Franklin	0	0	0	0.0%	0.0
Gasconade	0	0	0	0.0%	0.0
Gentry	0	0	0	0.0%	0.0
Greene	1	0	0	0.0%	0.0
Grundy	0	0	0	0.0%	0.0
Harrison	0	0	0	0.0%	0.0
Henry	0	0	0	0.0%	0.0
Hickory	0	0	0	0.0%	0.0
Holt	0	0	0	0.0%	0.0
Howard	0	0	0	0.0%	0.0
Howell	0	0	0	0.0%	0.0
Iron	0	0	0	0.0%	0.0
Jackson**	0	0	0	0.0%	0.0
Jasper	0	0	0	0.0%	0.0
Jefferson	0	3	0	-100.0%	0.0
Johnson	0	0	0	0.0%	0.0
Kansas City	6	5	2	-60.0%	0.5
Knox	0	0	0	0.0%	0.0
Laclede	0	0	0	0.0%	0.0
Lafayette	0	0	0	0.0%	0.0
Lawrence	0	0	0	0.0%	0.0
Lewis	0	0	0	0.0%	0.0
Lincoln	0	0	0	0.0%	0.0
Linn	0	0	0	0.0%	0.0

County	Five-Year Median	2000	2001	% Change 2000-2001	2001 Rate*
Livingston	0	0	0	0.0%	0.0
Macon	0	0	0	0.0%	0.0
Madison	0	0	0	0.0%	0.0
Maries	0	0	0	0.0%	0.0
Marion	0	0	0	0.0%	0.0
McDonald	0	0	0	0.0%	0.0
Mercer	0	0	0	0.0%	0.0
Miller	0	0	0	0.0%	0.0
Mississippi	0	1	0	-100.0%	0.0
Moniteau	0	0	0	0.0%	0.0
Monroe	0	0	0	0.0%	0.0
Montgomery	0	0	0	0.0%	0.0
Morgan	0	0	0	0.0%	0.0
New Madrid	2	2	2	0.0%	10.0
Newton	0	0	0	0.0%	0.0
Nodaway	0	0	0	0.0%	0.0
Oregon	0	0	0	0.0%	0.0
Osage	0	0	0	0.0%	0.0
Ozark	0	0	0	0.0%	0.0
Pemiscot	2	0	2	200.0%	9.5
Perry	0	0	0	0.0%	0.0
Pettis	0	0	0	0.0%	0.0
Phelps	0	0	0	0.0%	0.0
Pike	0	0	0	0.0%	0.0
Platte**	0	0	0	0.0%	0.0
Polk	0	0	0	0.0%	0.0
Pulaski	1	0	0	0.0%	0.0
Putnam	0	0	0	0.0%	0.0
Ralls	0	0	0	0.0%	0.0
Randolph	0	1	0	-100.0%	0.0
Ray	0	0	0	0.0%	0.0
Reynolds	0	0	0	0.0%	0.0
Ripley	0	0	0	0.0%	0.0
Saline	0	0	0	0.0%	0.0
Schuyler	0	0	0	0.0%	0.0
Scotland	0	0	0	0.0%	0.0
Scott	5	1	3	200.0%	7.4
Shannon	0	0	0	0.0%	0.0
Shelby	0	0	0	0.0%	0.0
St. Charles	0	0	1	100.0%	0.4
St. Clair	0	0	0	0.0%	0.0
St. Francois	0	0	0	0.0%	0.0
St. Louis City	40	21	15	-28.6%	4.5
St. Louis	15	15	6	-60.0%	0.6
Ste. Genevieve	0	0	0	0.0%	0.0
Stoddard	0	0	0	0.0%	0.0
Stone	0	0	0	0.0%	0.0
Sullivan	0	0	0	0.0%	0.0
Taney	0	0	0	0.0%	0.0
Texas	0	0	0	0.0%	0.0
Vernon	0	0	0	0.0%	0.0
Warren	0	0	0	0.0%	0.0
Washington	0	0	0	0.0%	0.0
Wayne	0	0	0	0.0%	0.0
Webster	0	0	0	0.0%	0.0
Worth	0	0	0	0.0%	0.0
Wright	0	0	0	0.0%	0.0
Missouri	99	52	33	-36.5%	0.6

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

**Outside the city limits of Kansas City.

Summary of Reported Chlamydia Cases by County Missouri, Five-Year Median (1997-2001), 2000, 2001

County	Five-Year Median	2000	2001	% Change 2000-2001	2001 Rate*
Adair	31	31	45	45.2%	186.0
Andrew	8	7	5	-28.6%	32.1
Atchison	1	2	0	-100.0%	0.0
Audrain	46	46	52	13.0%	221.8
Barry	29	47	28	-40.4%	84.4
Barton	11	7	14	100.0%	115.4
Bates	13	13	15	15.4%	93.4
Benton	11	15	8	-46.7%	46.1
Bollinger	7	3	3	0.0%	25.4
Boone	406	444	406	-8.6%	311.9
Buchanan	233	273	233	-14.7%	285.4
Butler	84	84	100	19.0%	247.7
Caldwell	6	6	4	-33.3%	44.8
Callaway	64	64	85	32.8%	224.3
Camden	29	28	23	-17.9%	66.5
Cape Girardeau	189	151	189	25.2%	281.3
Carroll	7	5	7	40.0%	69.3
Carter	1	1	4	300.0%	63.6
Cass	50	50	71	42.0%	85.4
Cedar	13	13	8	-38.5%	59.7
Chariton	6	6	2	-66.7%	23.4
Christian	67	67	73	9.0%	142.2
Clark	6	10	4	-60.0%	54.3
Clay**	125	114	199	74.6%	189.2
Clinton	10	10	18	80.0%	92.2
Cole	172	165	175	6.1%	251.8
Cooper	25	17	25	47.1%	154.8
Crawford	18	18	38	111.1%	169.4
Dade	4	7	4	-42.9%	50.4
Dallas	10	10	9	-10.0%	57.8
Daviess	6	14	15	7.1%	186.3
DeKalb	6	6	6	0.0%	53.2
Dent	15	8	16	100.0%	112.2
Douglas	8	3	17	466.7%	136.9
Dunklin	75	82	75	-8.5%	230.6
Franklin	60	75	83	10.7%	89.1
Gasconade	6	3	7	133.3%	46.7
Gentry	1	6	9	50.0%	131.0
Greene	528	569	593	4.2%	261.2
Grundy	14	14	21	50.0%	207.2
Harrison	9	21	9	-57.1%	107.0
Henry	11	14	11	-21.4%	51.7
Hickory	3	3	10	233.3%	114.6
Holt	2	7	0	-100.0%	0.0
Howard	16	16	17	6.3%	176.0
Howell	32	50	35	-30.0%	97.0
Iron	4	5	3	-40.0%	27.4
Jackson**	484	492	508	3.3%	159.0
Jasper	236	216	237	9.7%	236.4
Jefferson	132	127	140	10.2%	70.7
Johnson	119	119	140	17.6%	291.3
Kansas City	2,618	2,747	2,367	-13.8%	540.7
Knox	2	6	0	0.0%	0.0
Laclede	38	52	62	19.2%	197.3
Lafayette	31	42	51	21.4%	155.4
Lawrence	47	33	31	-6.1%	92.6
Lewis	9	11	8	-27.3%	78.2
Lincoln	25	26	27	3.8%	71.6
Linn	14	13	15	15.4%	108.2

County	Five-Year Median	2000	2001	% Change 2000-2001	2001 Rate*
Livingston	16	18	16	-11.1%	114.1
Macon	20	31	18	-41.9%	116.5
Madison	7	7	7	0.0%	60.1
Maries	4	3	5	66.7%	59.4
Marion	48	44	56	27.3%	202.0
McDonald	22	22	22	0.0%	109.1
Mercer	3	8	2	-75.0%	50.6
Miller	22	23	26	13.0%	114.9
Mississippi	37	54	37	-31.5%	277.4
Moniteau	8	7	8	14.3%	60.1
Monroe	7	7	11	57.1%	120.4
Montgomery	9	9	10	11.1%	82.6
Morgan	15	9	19	111.1%	100.5
New Madrid	47	61	61	0.0%	306.0
Newton	53	53	54	1.9%	108.6
Nodaway	34	26	27	3.8%	131.5
Oregon	5	5	4	-20.0%	38.9
Osage	6	2	13	550.0%	103.8
Ozark	6	1	6	500.0%	60.2
Pemiscot	116	150	102	-32.0%	482.3
Perry	11	9	11	22.2%	63.1
Pettis	75	75	81	8.0%	218.3
Phelps	50	45	77	71.1%	197.7
Pike	28	24	18	-25.0%	109.7
Platte**	40	62	51	-17.7%	116.5
Polk	19	23	33	43.5%	128.2
Pulaski	136	111	162	45.9%	423.8
Putnam	2	4	2	-50.0%	41.1
Ralls	6	4	7	75.0%	76.3
Randolph	44	53	31	-41.5%	129.9
Ray	13	13	23	76.9%	96.8
Reynolds	2	2	3	50.0%	45.3
Ripley	4	3	6	100.0%	42.3
Saline	46	46	37	-19.6%	162.4
Schuyler	2	2	3	50.0%	68.0
Scotland	3	6	4	0.0%	81.3
Scott	98	98	136	38.8%	335.3
Shannon	2	2	2	0.0%	24.1
Shelby	5	4	7	75.0%	105.1
St. Charles	193	296	264	-10.8%	94.1
St. Clair	6	6	7	16.7%	75.5
St. Francois	83	57	72	26.3%	129.1
St. Louis City	2,911	2,712	3,195	17.8%	956.7
St. Louis	2,490	2,490	2,560	2.8%	257.0
Ste. Genevieve	7	2	7	250.0%	40.1
Stoddard	25	22	51	131.8%	172.1
Stone	18	16	18	12.5%	65.4
Sullivan	10	15	10	-33.3%	145.7
Taney	35	48	53	10.4%	149.3
Texas	12	14	18	28.6%	80.1
Vernon	33	40	33	-17.5%	169.3
Warren	16	19	17	-10.5%	66.8
Washington	24	22	21	-4.5%	89.9
Wayne	5	0	7	700.0%	53.7
Webster	31	35	33	-5.7%	110.1
Worth	0	0	1	100.0%	43.6
Wright	24	36	24	-33.3%	120.4
Missouri	13,355	13,450	13,949	3.7%	255.1

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

**Outside the city limits of Kansas City.

Missouri Demographic Summary

Based On Data From Census 2000

All the material in this section is from the Missouri Economic Research and Information Center (MERIC) <http://www.ecodev.state.mo.us/business/researchandplanning/indicators/population/index.shtml>

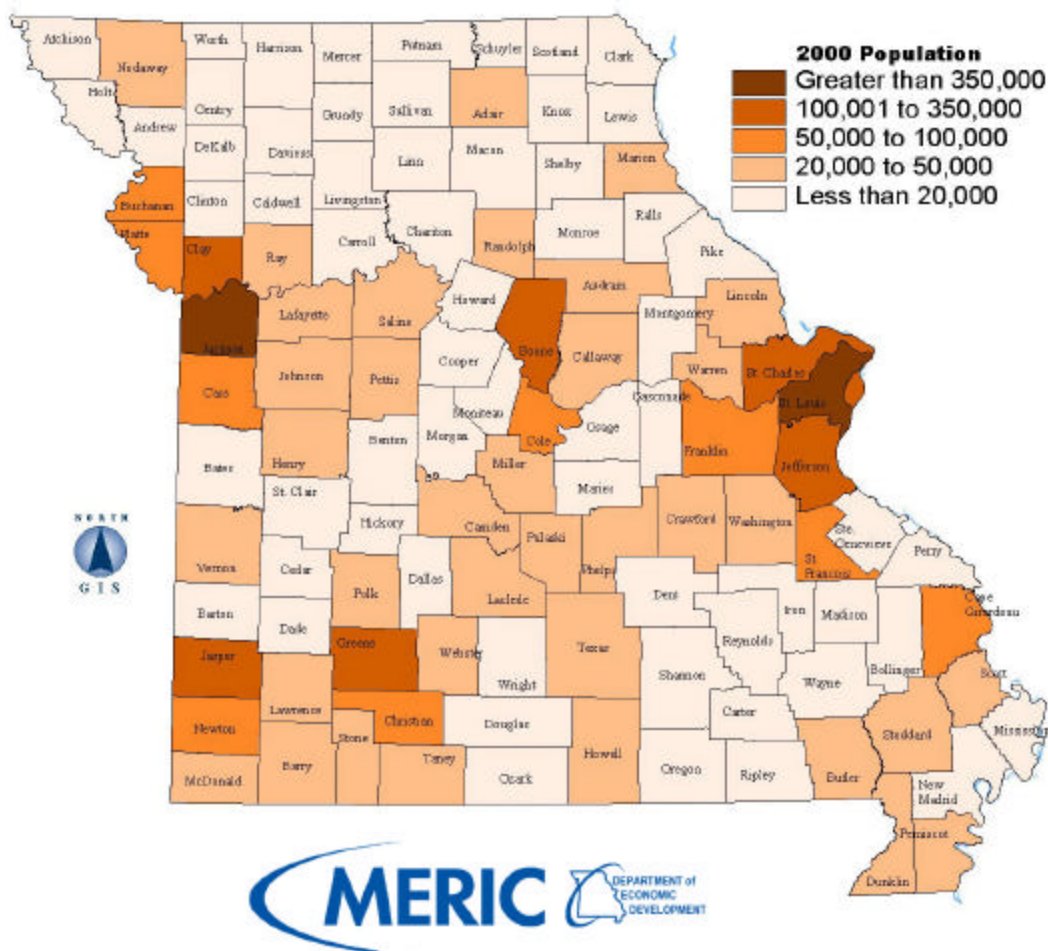
Missouri's total resident population in Census 2000 was 5,595,211, ranking the state 17th among all U.S. states. St. Louis County remained the state's largest county, surpassing the million-population threshold.

Resident Population Characteristics of Selected Missouri Counties (Census 2000)

Ten Largest Counties		Ten Smallest Counties	
County	Population	County	Population
St. Louis	1,016,315	Worth	2,382
Jackson	654,880	Mercer	3,757
St. Louis City	348,189	Schuyler	4,170
St. Charles	283,883	Knox	4,361
Greene	240,391	Scotland	4,983
Jefferson	198,099	Putnam	5,223
Clay	184,006	Holt	5,351
Boone	135,454	Carter	5,941
Jasper	104,686	Atchison	6,430
Franklin	93,807	Reynolds	6,689
Largest Growth		Smallest Growth	
County	Population	County	Population
St. Charles	70,976	St. Louis City	-48,496
Greene	32,442	Pemiscot	-1,874
Clay	30,595	New Madrid	-1,168
Jefferson	26,719	Atchison	-1,027
Boone	23,075	Mississippi	-1,015
St. Louis	22,786	Chariton	-764
Jackson	21,648	Holt	-683
Christian	21,641	Carroll	-463
Cass	18,284	Shelby	-143
Platte	15,914	Pulaski	-142
Fastest Growth		Slowest Growth	
County	Percentage Change	County	Percentage Change
Christian	66.3%	Atchison	-13.8%
Taney	55.3%	St. Louis City	-12.2%
Stone	50.2%	Holt	-11.3%
Lincoln	34.8%	Pemiscot	-8.5%
Camden	34.8%	Chariton	-8.3%
St. Charles	33.3%	Mississippi	-7.0%
Webster	30.7%	New Madrid	-5.6%
Cass	28.7%	Carroll	-4.3%
McDonald	28.0%	Knox	-2.7%
Platte	27.5%	Worth	-2.4%

Socio-Demographic Data: Missouri

Total Resident Population of Missouri Counties (Census 2000)



Population Changes

Missouri's population grew by 478,138 persons since 1990—a growth rate of 9.3 percent. This growth was larger than in any other decade this past century. As in recent decades, there were substantial population gains in the Ozarks and in the state's metropolitan areas. But there also was new growth in many rural counties north and south. Regional population shifts show a continued expansion outward from older, larger urban centers. In fact, the population outside Missouri's combined municipal areas grew at a faster rate in the 1990s (12.1%) than the combined population within them (7.9%).

Among Missouri's counties, Christian County grew by the highest percentage rate (66.3%) and St. Charles County gained the most population (70,976) last decade. Worth County is Missouri's least populous county, with 2,382 citizens. Pemiscot County lost 1,874 citizens, the most of any county outside St. Louis City. Atchison County suffered through the fastest rate of decline, losing 13.8% of its residents.

Socio-Demographic Data: Missouri

Resident Population in Missouri by HIV Region and County in 2000 and 1990,
and Change in Population From 1990 To 2000 (Census 2000)

1990-2000 Change							
HIV Region	County	2000	1990	Total	Rank	Percent	Rank
	Missouri	5,595,211	5,117,073	478,138	-	9.3%	-
Kansas City	Bates	16,653	15,025	1,628	53	10.8%	54
Kansas City	Benton	17,180	13,859	3,321	35	24.0%	14
Kansas City	Cass	82,092	63,808	18,284	9	28.7%	8
Kansas City	Clay	184,006	153,411	30,595	3	19.9%	21
Kansas City	Henry	21,997	20,044	1,953	45	9.7%	57
Kansas City	Jackson	654,880	633,232	21,648	7	3.4%	79
Kansas City	Johnson	48,258	42,514	5,744	25	13.5%	42
Kansas City	Lafayette	32,960	31,107	1,853	47	6.0%	75
Kansas City	Platte	73,781	57,867	15,914	10	27.5%	10
Kansas City	Ray	23,354	21,971	1,383	59	6.3%	72
North Central	Adair	24,977	24,577	400	84	1.6%	90
North Central	Audrain	25,853	23,599	2,254	43	9.6%	58
North Central	Boone	135,454	112,379	23,075	5	20.5%	20
North Central	Callaway	40,766	32,809	7,957	18	24.3%	12
North Central	Camden	37,051	27,495	9,556	16	34.8%	5
North Central	Chariton	8,438	9,202	-764	110	-8.3%	111
North Central	Clark	7,416	7,547	-131	104	-1.7%	104
North Central	Cole	71,397	63,579	7,818	19	12.3%	47
North Central	Cooper	16,670	14,835	1,835	48	12.4%	46
North Central	Gasconade	15,342	14,006	1,336	60	9.5%	59
North Central	Howard	10,212	9,631	581	80	6.0%	74
North Central	Knox	4,361	4,482	-121	103	-2.7%	107
North Central	Lewis	10,494	10,233	261	87	2.6%	85
North Central	Linn	13,754	13,885	-131	104	-0.9%	101
North Central	Macon	15,762	15,345	417	83	2.7%	83
North Central	Maries	8,903	7,976	927	71	11.6%	48
North Central	Marion	28,289	27,682	607	78	2.2%	88
North Central	Miller	23,564	20,700	2,864	39	13.8%	38
North Central	Moniteau	14,827	12,298	2,529	40	20.6%	19
North Central	Monroe	9,311	9,104	207	89	2.3%	87
North Central	Montgomery	12,136	11,355	781	75	6.9%	70
North Central	Morgan	19,309	15,574	3,735	33	24.0%	13
North Central	Osage	13,062	12,018	1,044	69	8.7%	64
North Central	Pettis	39,403	35,437	3,966	32	11.2%	51
North Central	Pike	18,351	15,969	2,382	42	14.9%	32
North Central	Putnam	5,223	5,079	144	93	2.8%	81
North Central	Ralls	9,626	8,476	1,150	67	13.6%	40
North Central	Randolph	24,663	24,370	293	86	1.2%	91

Socio-Demographic Data: Missouri

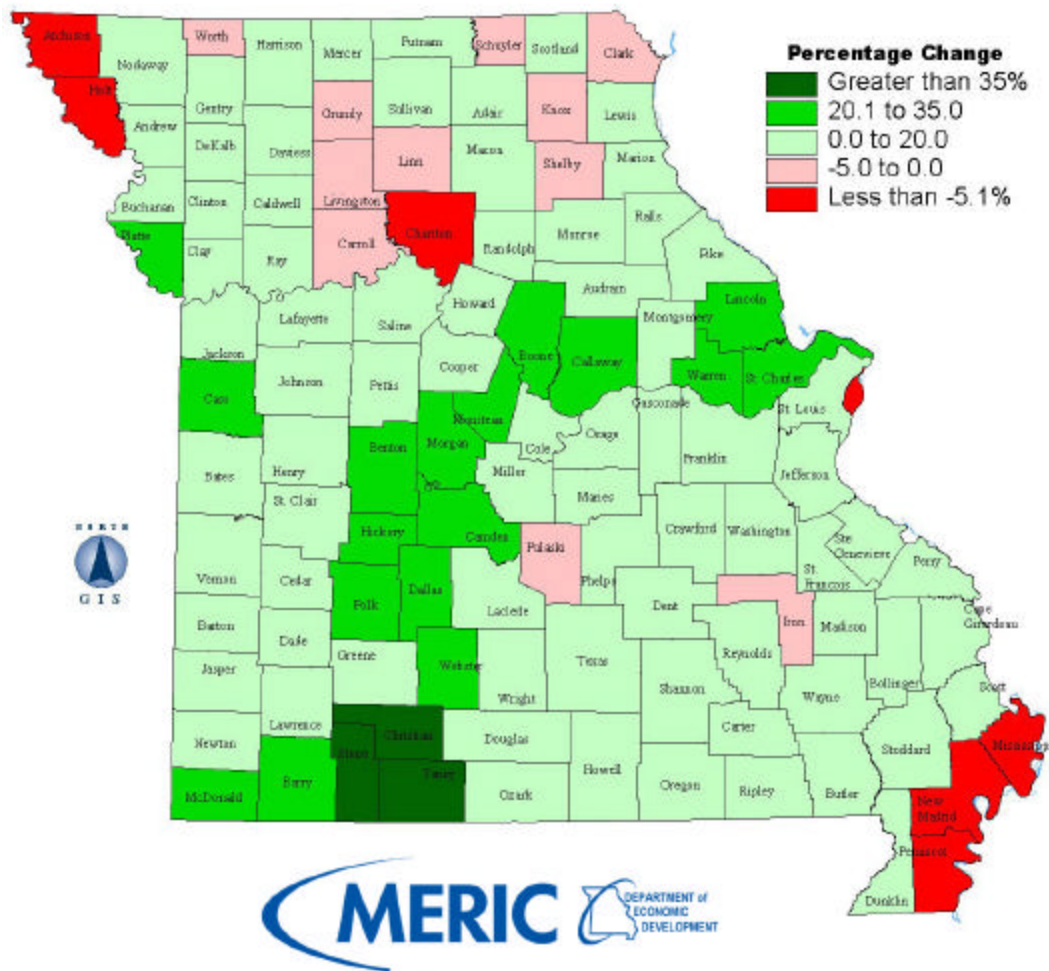
1990-2000 Change							
HIV Region	County	2000	1990	Total	Rank	Percent	Rank
North Central	Saline	23,756	23,523	233	88	1.0%	92
North Central	Schuyler	4,170	4,236	-66	101	-1.6%	103
North Central	Scotland	4,983	4,822	161	91	3.3%	80
North Central	Shelby	6,799	6,942	-143	107	-2.1%	105
North Central	Sullivan	7,219	6,326	893	72	14.1%	37
Northwest	Andrew	16,492	14,632	1,860	46	12.7%	45
Northwest	Atchison	6,430	7,457	-1,027	112	-13.8%	115
Northwest	Buchanan	85,998	83,083	2,915	38	3.5%	78
Northwest	Caldwell	8,969	8,380	589	79	7.0%	69
Northwest	Carroll	10,285	10,748	-463	108	-4.3%	108
Northwest	Clinton	18,979	16,595	2,384	41	14.4%	35
Northwest	Daviess	8,016	7,865	151	92	1.9%	89
Northwest	DeKalb	11,597	9,967	1,630	52	16.4%	28
Northwest	Gentry	6,861	6,848	13	97	0.2%	96
Northwest	Grundy	10,432	10,536	-104	102	-1.0%	102
Northwest	Harrison	8,850	8,469	381	85	4.5%	77
Northwest	Holt	5,351	6,034	-683	109	-11.3%	113
Northwest	Livingston	14,558	14,592	-34	99	-0.2%	98
Northwest	Mercer	3,757	3,723	34	95	0.9%	94
Northwest	Nodaway	21,912	21,709	203	90	0.9%	93
Northwest	Worth	2,382	2,440	-58	100	-2.4%	106
Southeast	Bollinger	12,029	10,619	1,410	58	13.3%	43
Southeast	Butler	40,867	38,765	2,102	44	5.4%	76
Southeast	Cape Girardeau	68,693	61,633	7,060	21	11.5%	49
Southeast	Carter	5,941	5,515	426	82	7.7%	65
Southeast	Crawford	22,804	19,173	3,631	34	18.9%	23
Southeast	Dunklin	33,155	33,112	43	94	0.1%	97
Southeast	Iron	10,697	10,726	-29	98	-0.3%	99
Southeast	Madison	11,800	11,127	673	77	6.0%	73
Southeast	Mississippi	13,427	14,442	-1,015	111	-7.0%	110
Southeast	New Madrid	19,760	20,928	-1,168	113	-5.6%	109
Southeast	Pemiscot	20,047	21,921	-1,874	114	-8.5%	112
Southeast	Perry	18,132	16,648	1,484	56	8.9%	63
Southeast	Reynolds	6,689	6,661	28	96	0.4%	95
Southeast	Ripley	13,509	12,303	1,206	64	9.8%	56
Southeast	Scott	40,422	39,376	1,046	68	2.7%	84
Southeast	St. Francois	55,641	48,904	6,737	22	13.8%	39
Southeast	Ste. Genevieve	17,842	16,037	1,805	49	11.3%	50
Southeast	Stoddard	29,705	28,895	810	74	2.8%	82

Socio-Demographic Data: Missouri

1990-2000 Change							
HIV Region	County	2000	1990	Total	Rank	Percent	Rank
Southeast	Washington	23,344	20,380	2,964	37	14.5%	34
Southeast	Wayne	13,259	11,543	1,716	50	14.9%	33
Southwest	Barry	34,010	27,547	6,463	23	23.5%	17
Southwest	Barton	12,541	11,312	1,229	61	10.9%	53
Southwest	Cedar	13,733	12,093	1,640	51	13.6%	41
Southwest	Christian	54,285	32,644	21,641	8	66.3%	1
Southwest	Dade	7,923	7,449	474	81	6.4%	71
Southwest	Dallas	15,661	12,646	3,015	36	23.8%	15
Southwest	Dent	14,927	13,702	1,225	62	8.9%	62
Southwest	Douglas	13,084	11,876	1,208	63	10.2%	55
Southwest	Greene	240,391	207,949	32,442	2	15.6%	30
Southwest	Hickory	8,940	7,335	1,605	54	21.9%	18
Southwest	Howell	37,238	31,447	5,791	24	18.4%	25
Southwest	Jasper	104,686	90,465	14,221	11	15.7%	29
Southwest	Laclede	32,513	27,158	5,355	26	19.7%	22
Southwest	Lawrence	35,204	30,236	4,968	29	16.4%	26
Southwest	McDonald	21,681	16,938	4,743	30	28.0%	9
Southwest	Newton	52,636	44,445	8,191	17	18.4%	24
Southwest	Oregon	10,344	9,470	874	73	9.2%	61
Southwest	Ozark	9,542	8,598	944	70	11.0%	52
Southwest	Phelps	39,825	35,248	4,577	31	13.0%	44
Southwest	Polk	26,992	21,826	5,166	27	23.7%	16
Southwest	Pulaski	41,165	41,307	-142	106	-0.3%	100
Southwest	Shannon	8,324	7,613	711	76	9.3%	60
Southwest	St. Clair	9,652	8,457	1,195	66	14.1%	36
Southwest	Stone	28,658	19,078	9,580	15	50.2%	3
Southwest	Taney	39,703	25,561	14,142	12	55.3%	2
Southwest	Texas	23,003	21,476	1,527	55	7.1%	68
Southwest	Vernon	20,454	19,041	1,413	57	7.4%	66
Southwest	Webster	31,045	23,753	7,292	20	30.7%	7
Southwest	Wright	17,955	16,758	1,197	65	7.1%	67
St. Louis	Franklin	93,807	80,603	13,204	13	16.4%	27
St. Louis	Jefferson	198,099	171,380	26,719	4	15.6%	31
St. Louis	Lincoln	38,944	28,892	10,052	14	34.8%	4
St. Louis	St. Charles	283,883	212,907	70,976	1	33.3%	6
St. Louis	St. Louis	1,016,315	993,529	22,786	6	2.3%	86
St. Louis	St. Louis City	348,189	396,685	-48,496	115	-12.2%	114
St. Louis	Warren	24,525	19,534	4,991	28	25.6%	11

Socio-Demographic Data: Missouri

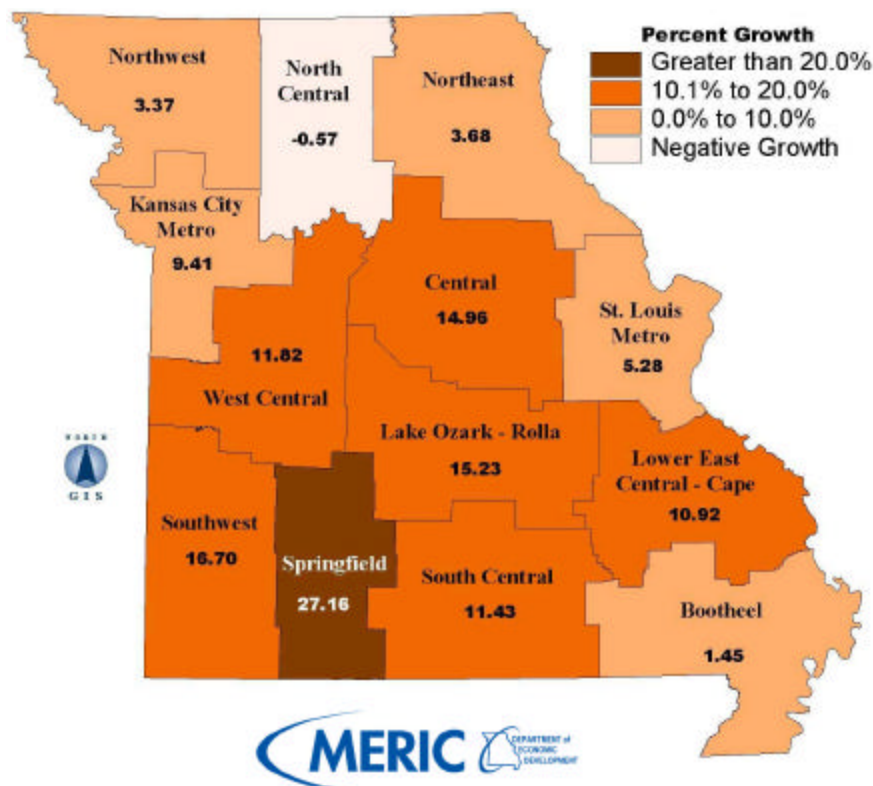
Percent Change in Missouri Resident Population
by County From 1990 to 2000 (Census 2000)



The greatest population growth was 27.16 percent in the Springfield region. Other regions in Missouri experiencing rapid growth in that period were the Southwest (16.7 percent), Lake Ozark-Rolla (15.2 percent), and Central (15.0 percent) regions. The North Central region had negative growth (-0.57 percent) followed by slow growth in the Bootheel (1.45 percent), Northwest (3.37 percent), and Northeast (3.68 percent) regions. [Note that these regions are not the same as the HIV Regions used in some of the tables in this section and in other sections of the *2001 Epidemiologic Profiles*.]

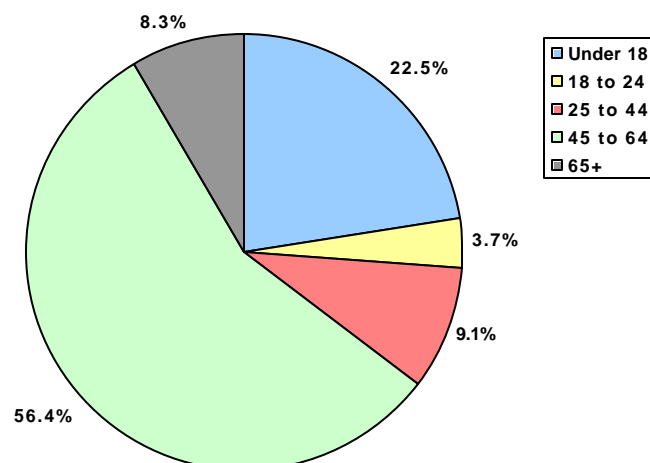
Socio-Demographic Data: Missouri

Percent Change in Missouri Resident Population
by Region From 1990 to 2000 (Census 2000)



Of the 478,310 person increase in Missouri between 1990 and 2000, more than half (56.4 percent) was in the 45 to 64 year old age bracket. The Under 18 age bracket followed (22.5 percent). The smallest portion of the overall Missouri population increase was in the 18 to 24 age bracket (3.7 percent).

Age Group Contribution to Missouri
Resident Population Growth, 1990-2000



Within the age brackets, and taken into account the total population, the 45 to 64 group had tremendous growth in the state from 1990. Overall growth for this age bracket in Missouri between 1990 and 2000 was 27.6 percent. This increase is not surprising as it contains the Baby Boomer generation. The Baby Boomer generation is defined as those born between 1946 and 1964. It is likely that the 45 to 64 age bracket will continue to grow in the next decade as the second half of the Baby Boomer generation reaches this age bracket.

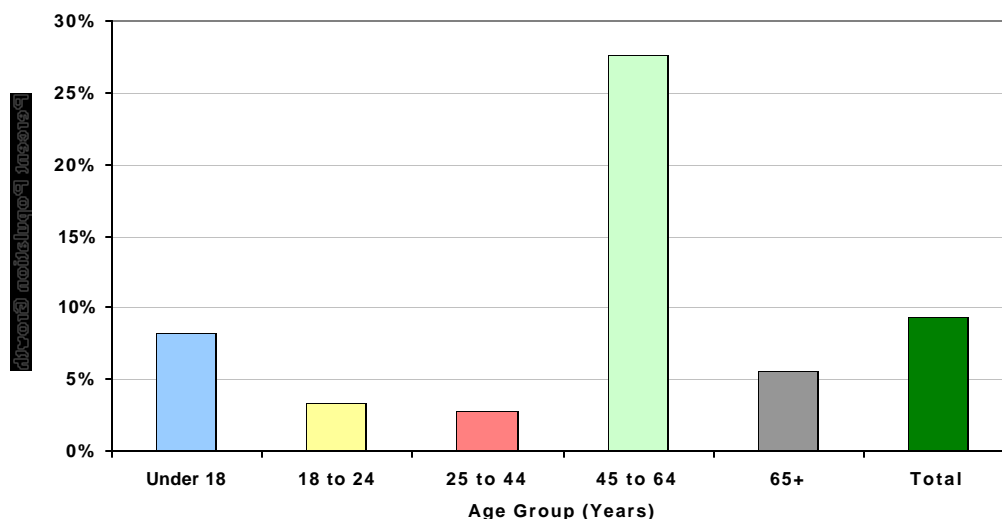
The Under 18 age group had the second largest growth rate of 8.2 percent. This group includes the children, or even grandchildren, of the Baby Boomers.

However, the largest age category in Missouri in 1990 as well as 2000 continues to be the 25 to 44 age bracket. This group realized a modest 2.8 percent growth during the time period, the least of any age category. The pattern of growth within the age brackets suggests that by the next census, the 45 to 64 age bracket may become the largest age group in the state.

**Growth of Missouri Resident Population
by Age Group, 1990 - 2000**

Age Group	1990	2000	Population Increase	Percent Change
Under 18	1,319,066	1,426,779	107,713	8.2%
18 to 24	519,675	537,140	17,465	3.4%
25 to 44	1,584,566	1,628,206	43,640	2.8%
45 to 64	978,098	1,247,732	269,634	27.6%
65+	715,496	755,353	39,857	5.6%
Total	5,116,901	5,595,210	478,309	9.3%

**Percent Growth of Missouri Resident Population
by Age Group, 1990 to 2000**



Growth in the 45 to 64 age bracket was also significant regionally. Within the four regions having the largest population growth between 1990 and 2000, the 45 to 64 age bracket contributed most to the population increase in each region. In the Central region, 48.4 percent of the population increase was from the 45 to 64 group, more than twice that of any other group. Similar patterns were seen in the Lake Ozark-Rolla (45.9 percent), Southwest (37.4 percent), and Springfield (35.0 percent) regions.

It is clear that the Baby Boomer generation has had a significant impact on population trends in the last ten years. As this generation ages, continued growth in the 45 to 64 bracket followed by increases in the 65+ group can be expected.

Socio-Demographic Data: Missouri

Missouri Minority Populations: Blacks

Missouri's largest race category, Black or African American, reported significant population increases during the 1990's. The black population grew 14.5% from 549,719 in 1990 to 629,391 in 2000. In contrast, Missouri's total population grew by 9.3% from just over 5.1 million in 1990 to slightly under 5.6 million in 2000.

Black Resident Population of Selected Missouri Counties (Census 2000)

Ten Largest Counties		Ten Smallest Counties	
County	Population	County	Population
St. Louis County	193,306	Mercer County	7
City of St. Louis	178,266	Holt County	6
Jackson County	152,391	Ripley County	6
Boone County	11,572	Carter County	5
St. Charles County	7,635	Clark County	5
Cole County	7,084	Daviess County	4
Greene County	5,426	Knox County	4
Pemiscot County	5,259	Worth County	4
Pulaski County	4,935	Putnam County	3
Clay County	4,894	Schuyler County	2
Ten Largest Growth		Ten Smallest Growth	
County	Population	County	Population
St. Louis County	53,711	City of St. Louis	-10,399
Jackson County	16,084	Pulaski County	-770
Boone County	3,165	Johnson County	-382
St. Charles County	2,681	Pemiscot County	-338
Cole County	2,235	New Madrid County	-244
Clay County	2,185	Stoddard County	-139
Greene County	1,665	Lafayette County	-133
Platte County	1,348	Randolph County	-106
Buchanan County	1,098	Saline County	-79
Pike County	834	Lewis County	-78
Ten Fastest Growth		Ten Slowest Growth	
County	Percentage Change	County	Percentage Change
Cedar County	1366.7%	Osage County	-46.2%
Reynolds County	1066.7%	Stoddard County	-34.0%
Crawford County	1000.0%	Knox County	-33.3%
Sullivan County	900.0%	Linn County	-29.3%
McDonald County	850.0%	Lewis County	-22.7%
Taney County	762.5%	Ralls County	-22.5%
Ozark County	600.0%	Chariton County	-20.2%
Dent County	490.0%	Carroll County	-19.9%
Carter County	400.0%	Johnson County	-15.5%
Douglas County	366.7%	Lafayette County	-15.1%

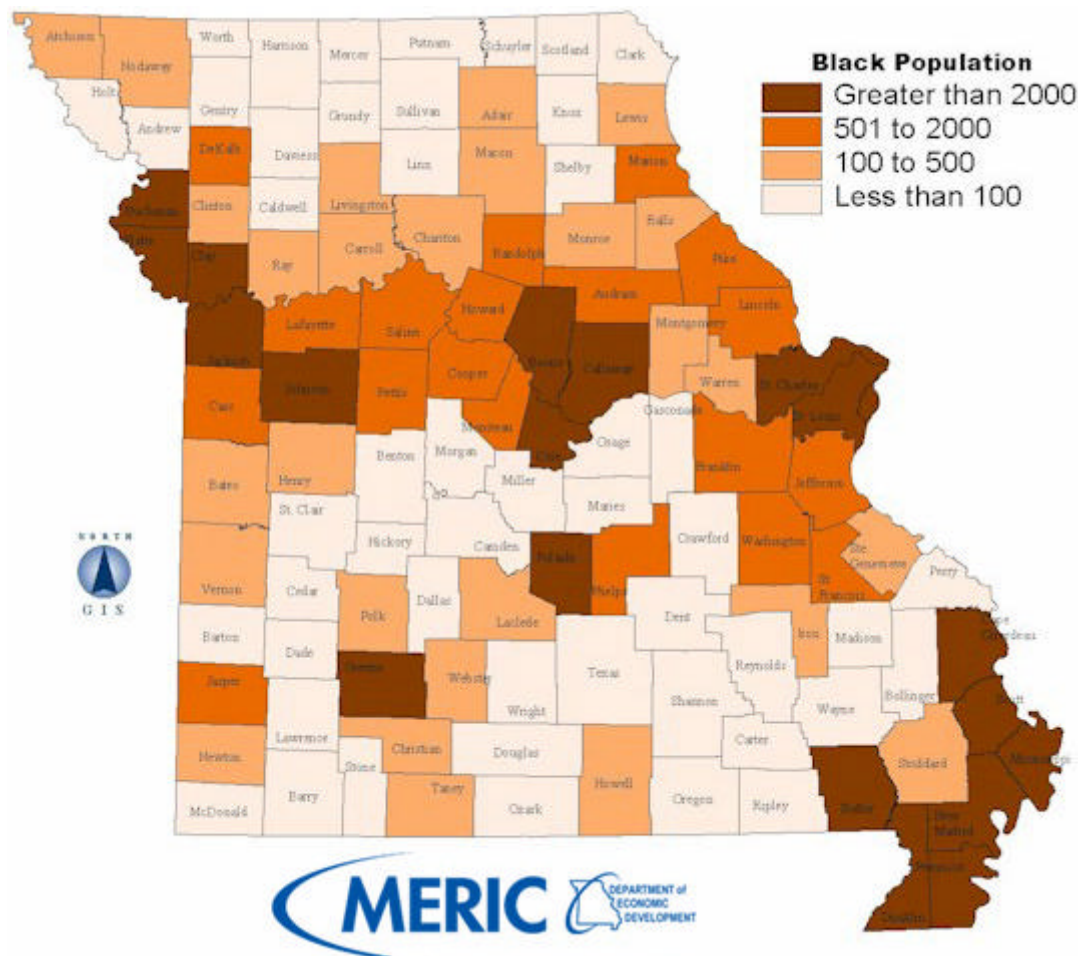
Socio-Demographic Data: Missouri

Cedar (1,366.7%), Reynolds (1,066.7%), and Crawford (1,000%) counties reported enormous percent increases since 1990 in Black population. St. Louis County reported the largest increase in persons - 53,711, a 38.5% increase; followed by Jackson County with 16,084, an 11.8% increase; and Boone County with 3,165, a 37.6% increase. Thirty-two of Missouri's 114 counties reported percentage increases from 1990 of over 100%, with three reporting increases of 1,000% or higher.

Not all of Missouri counties experienced positive growth in Black population. Osage (-46.2%), Stoddard (-34.0%), and Knox (-33.3%) counties experienced the largest percent declines in Black population. St. Louis City experienced the largest decline in the number of Black persons, 10,399, a 5.5% decrease; followed by Pulaski County with a loss of 770 persons, a 13.5% decrease; and Johnson County with a loss of 382 persons, a 15.5% decrease. Overall, twenty-five of Missouri's 114 counties and St. Louis City reported negative growth in the Black population, while three counties reported no change.

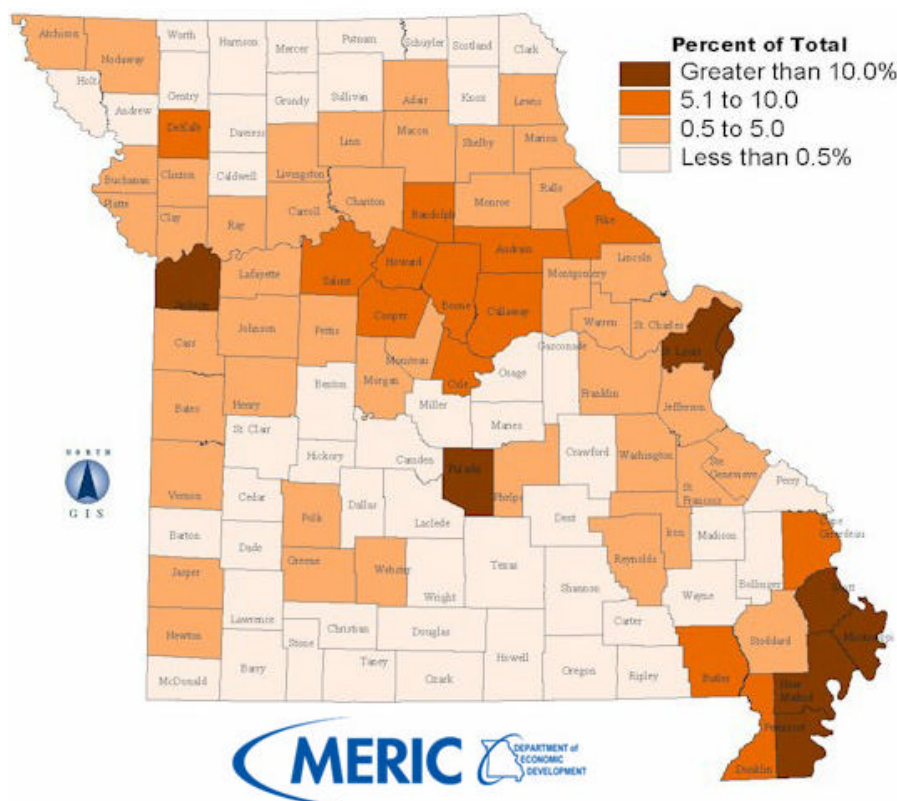
Census data for the 1990 and 2000 census are not directly comparable because individuals could report only one race in the 1990 census and could report multiple races in the 2000 census. Thus the difference in population is due both to changes in the census questionnaire and to real population change.

Total Black Resident Population of Missouri Counties (Census 2000)

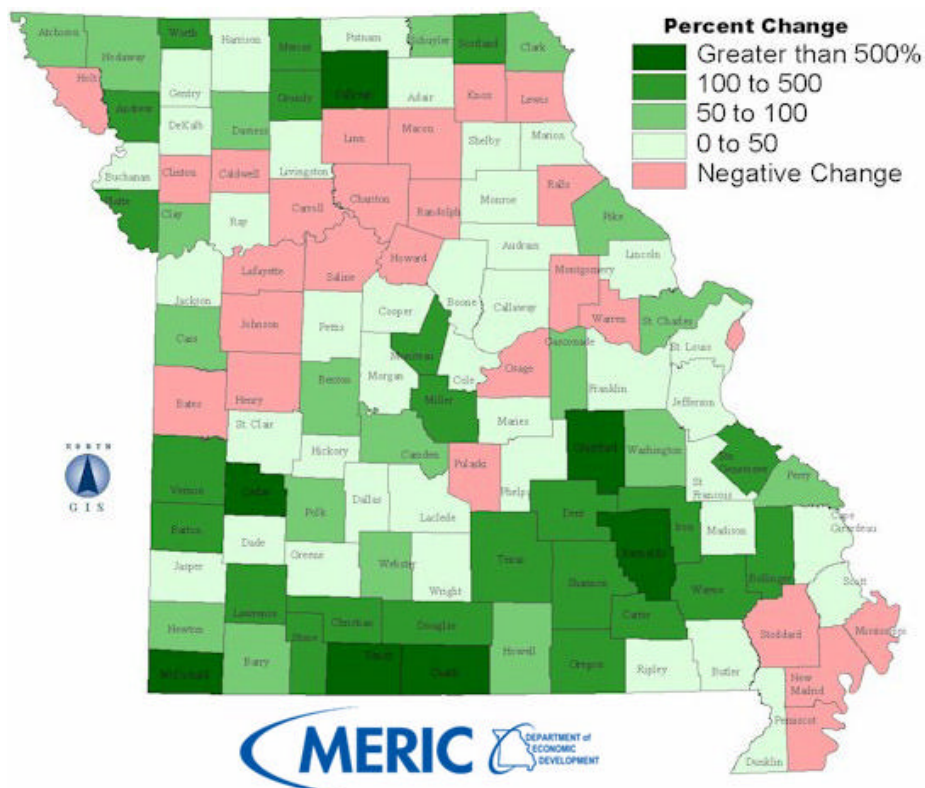


Socio-Demographic Data: Missouri

Percent of Total Resident Population
of Missouri Counties That is Black (Census 2000)



Percent Change in Black Resident Population
for Missouri Counties From 1990 to 2000 (Census 2000)



Socio-Demographic Data: Missouri

Resident Black Population in Missouri by HIV Region and County in 2000
and 1990, and Change in Black Population From 1990 To 2000 (Census 2000)

HIV Region	County	2000 Total Population	2000 Black Population	1990 Black Population	Total Change from 1990	% Change from 1990
	Missouri	5,595,211	629,391	549,719	79,672	14.5%
Kansas City	Bates	16,653	101	108	-7	-6.5%
Kansas City	Benton	17,180	25	13	12	92.3%
Kansas City	Cass	82,092	1,166	687	479	69.7%
Kansas City	Clay	184,006	4,894	2,709	2,185	80.7%
Kansas City	Henry	21,997	225	227	-2	-0.9%
Kansas City	Jackson	654,880	152,391	136,307	16,084	11.8%
Kansas City	Johnson	48,258	2,089	2,471	-382	-15.5%
Kansas City	Lafayette	32,960	749	882	-133	-15.1%
Kansas City	Platte	73,781	2,574	1,226	1,348	110.0%
Kansas City	Ray	23,354	341	303	38	12.5%
North Central	Adair	24,977	299	223	76	34.1%
North Central	Audrain	25,853	1,859	1,421	438	30.8%
North Central	Boone	135,454	11,572	8,407	3,165	37.6%
North Central	Callaway	40,766	2,307	1,582	725	45.8%
North Central	Camden	37,051	95	58	37	63.8%
North Central	Chariton	8,438	269	337	-68	-20.2%
North Central	Clark	7,416	5	3	2	66.7%
North Central	Cole	71,397	7,084	4,849	2,235	46.1%
North Central	Cooper	16,670	1,493	1,150	343	29.8%
North Central	Gasconade	15,342	18	11	7	63.6%
North Central	Howard	10,212	699	733	-34	-4.6%
North Central	Knox	4,361	4	6	-2	-33.3%
North Central	Lewis	10,494	265	343	-78	-22.7%
North Central	Linn	13,754	82	116	-34	-29.3%
North Central	Macon	15,762	349	363	-14	-3.9%
North Central	Maries	8,903	29	27	2	7.4%
North Central	Marion	28,289	1,308	1,251	57	4.6%
North Central	Miller	23,564	65	23	42	182.6%
North Central	Moniteau	14,827	561	158	403	255.1%
North Central	Monroe	9,311	357	357	0	0.0%
North Central	Montgomery	12,136	248	289	-41	-14.2%
North Central	Morgan	19,309	98	94	4	4.3%
North Central	Osage	13,062	21	39	-18	-46.2%
North Central	Pettis	39,403	1,197	1,172	25	2.1%
North Central	Pike	18,351	1,682	848	834	98.3%
North Central	Putnam	5,223	3	2	1	50.0%
North Central	Ralls	9,626	107	138	-31	-22.5%
North Central	Randolph	24,663	1734	1840	-106	-5.8%

Socio-Demographic Data: Missouri

HIV Region	County	2000 Total Population	2000 Black Population	1990 Black Population	Total Change from 1990	% Change from 1990
North Central	Saline	23,756	1,280	1,359	-79	-5.8%
North Central	Schuyler	4,170	2	1	1	100.0%
North Central	Scotland	4,983	10	3	7	233.3%
North Central	Shelby	6,799	66	56	10	17.9%
North Central	Sullivan	7,219	10	1	9	900.0%
Northwest	Andrew	16,492	69	32	37	115.6%
Northwest	Atchison	6,430	132	87	45	51.7%
Northwest	Buchanan	85,998	3,751	2,653	1,098	41.4%
Northwest	Caldwell	8,969	12	14	-2	-14.3%
Northwest	Carroll	10,285	177	221	-44	-19.9%
Northwest	Clinton	18,979	288	337	-49	-14.5%
Northwest	Daviess	8,016	4	2	2	100.0%
Northwest	DeKalb	11,597	1,028	749	279	37.2%
Northwest	Gentry	6,861	8	6	2	33.3%
Northwest	Grundy	10,432	42	11	31	281.8%
Northwest	Harrison	8,850	12	8	4	50.0%
Northwest	Holt	5,351	6	7	-1	-14.3%
Northwest	Livingston	14,558	339	319	20	6.3%
Northwest	Mercer	3,757	7	3	4	133.3%
Northwest	Nodaway	21,912	295	166	129	77.7%
Northwest	Worth	2,382	4	1	3	300.0%
Southeast	Bollinger	12,029	25	12	13	108.3%
Southeast	Butler	40,867	2,132	1,983	149	7.5%
Southeast	Cape Girardeau	68,693	3,624	2,993	631	21.1%
Southeast	Carter	5,941	5	1	4	400.0%
Southeast	Crawford	22,804	33	3	30	1000.0%
Southeast	Dunklin	33,155	2,879	2,635	244	9.3%
Southeast	Iron	10,697	167	49	118	240.8%
Southeast	Madison	11,800	15	10	5	50.0%
Southeast	Mississippi	13,427	2,757	2,804	-47	-1.7%
Southeast	New Madrid	19,760	3,035	3,279	-244	-7.4%
Southeast	Pemiscot	20,047	5,259	5,597	-338	-6.0%
Southeast	Perry	18,132	33	17	16	94.1%
Southeast	Reynolds	6,689	35	3	32	1066.7%
Southeast	Ripley	13,509	6	6	0	0.0%
Southeast	Scott	40,422	4,246	3,499	747	21.3%
Southeast	St. Francois	55,641	1,126	969	157	16.2%
Southeast	Ste. Genevieve	17,842	128	45	83	184.4%
Southeast	Stoddard	29,705	270	409	-139	-34.0%

Socio-Demographic Data: Missouri

HIV Region	County	2000 Total Population	2000 Black Population	1990 Black Population	Total Change from 1990	% Change from 1990
Southeast	Washington	23,344	578	378	200	52.9%
Southeast	Wayne	13,259	22	8	14	175.0%
Southwest	Barry	34,010	39	25	14	56.0%
Southwest	Barton	12,541	36	11	25	227.3%
Southwest	Cedar	13,733	44	3	41	1366.7%
Southwest	Christian	54,285	145	35	110	314.3%
Southwest	Dade	7,923	21	20	1	5.0%
Southwest	Dallas	15,661	19	16	3	18.8%
Southwest	Dent	14,927	59	10	49	490.0%
Southwest	Douglas	13,084	14	3	11	366.7%
Southwest	Greene	240,391	5,426	3,761	1,665	44.3%
Southwest	Hickory	8,940	7	5	2	40.0%
Southwest	Howell	37,238	114	62	52	83.9%
Southwest	Jasper	104,686	1,551	1,155	396	34.3%
Southwest	Laclede	32,513	138	96	42	43.8%
Southwest	Lawrence	35,204	95	24	71	295.8%
Southwest	McDonald	21,681	38	4	34	850.0%
Southwest	Newton	52,636	312	175	137	78.3%
Southwest	Oregon	10,344	10	3	7	233.3%
Southwest	Ozark	9,542	14	2	12	600.0%
Southwest	Phelps	39,825	596	398	198	49.7%
Southwest	Polk	26,992	122	70	52	74.3%
Southwest	Pulaski	41,165	4,935	5,705	-770	-13.5%
Southwest	Shannon	8,324	14	3	11	366.7%
Southwest	St. Clair	9,652	22	22	0	0.0%
Southwest	Stone	28,658	21	6	15	250.0%
Southwest	Taney	39,703	138	16	122	762.5%
Southwest	Texas	23,003	49	16	33	206.3%
Southwest	Vernon	20,454	125	59	66	111.9%
Southwest	Webster	31,045	359	190	169	88.9%
Southwest	Wright	17,955	50	36	14	38.9%
St. Louis	Franklin	93,807	882	752	130	17.3%
St. Louis	Jefferson	198,099	1,354	1,209	145	12.0%
St. Louis	Lincoln	38,944	677	591	86	14.6%
St. Louis	St. Charles	283,883	7,635	4,954	2,681	54.1%
St. Louis	St. Louis City	348,189	178,266	188,665	-10,399	-5.5%
St. Louis	St. Louis	1,016,315	193,306	139,595	53,711	38.5%
St. Louis	Warren	24,525	476	513	-37	-7.2%

Socio-Demographic Data: Missouri

Missouri Minority Populations: Hispanics

Missouri's Hispanic population grew by a staggering 92.2% from 61,698 in 1990 to 118,592 in 2000. In contrast, Missouri's total population grew by 9.3% from just over 5.1 million in 1990 to slightly under 5.6 million in 2000.

Hispanic Resident Population of Selected Missouri Counties (Census 2000)

Ten Largest Counties		Ten Smallest Counties	
County	Population	County	Population
Jackson County	35,160	Atchison County	43
St. Louis County	14,577	Shelby County	43
City of St. Louis	7,022	Ralls County	42
Clay County	6,594	Scotland County	42
Greene County	4,434	Putnam County	32
St. Charles County	4,176	Schuyler County	27
Jasper County	3,615	Knox County	26
Boone County	2,413	Holt County	21
Pulaski County	2,404	Mercer County	11
Platte County	2,211	Worth County	7
Ten Largest Growth		Ten Smallest Growth	
County	Persons	County	Persons
Jackson County	16,272	Putnam County	8
St. Louis County	4,766	Holt County	5
Clay County	3,055	Madison County	4
Jasper County	2,818	Monroe County	4
Greene County	2,659	Mercer County	4
McDonald County	1,909	Bollinger County	-2
City of St. Louis	1,898	Worth County	-2
St. Charles County	1,868	Dade County	-9
Barry County	1,561	Atchison County	-61
Pettis County	1,258	DeKalb County	-75
Ten Fastest Growth		Ten Slowest Growth	
County	Percentage Change	County	Percentage Change
Sullivan County	2164.3%	Daviess County	19.6%
McDonald County	1577.7%	Nodaway County	14.8%
Barry County	1027.0%	Linn County	10.6%
Moniteau County	845.7%	Monroe County	8.3%
Pettis County	467.7%	Madison County	6.5%
Lawrence County	466.4%	Bollinger County	-2.9%
Saline County	404.8%	Dade County	-11.8%
Taney County	395.9%	Worth County	-22.2%
Dunklin County	387.6%	DeKalb County	-37.5%
Jasper County	353.6%	Atchison County	-58.7%

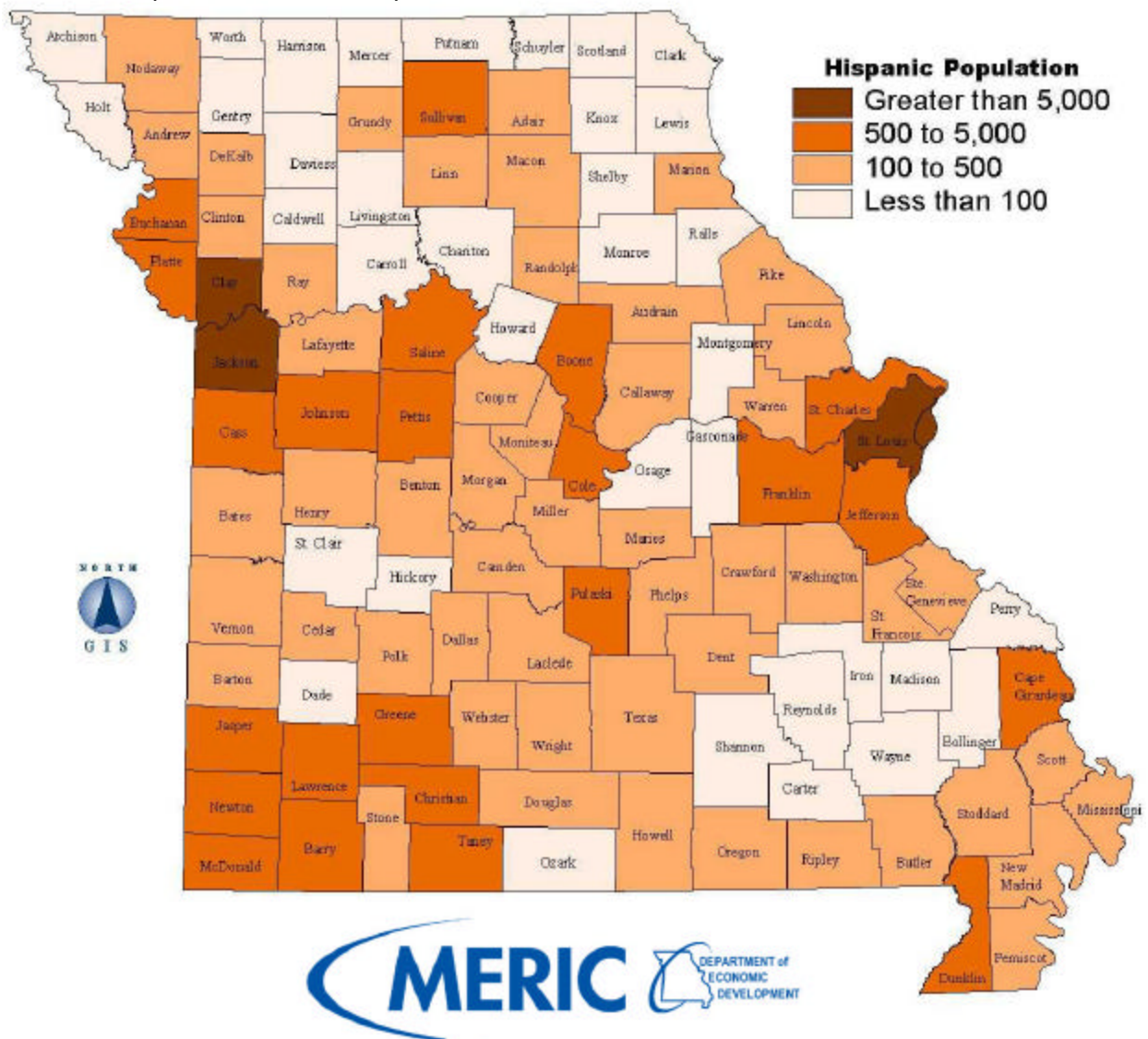
Socio-Demographic Data: Missouri

Not all of Missouri counties experienced positive growth in Hispanic populations. Atchison, DeKalb, Worth, Dade, and Bollinger counties reported decreases in Hispanic populations. DeKalb County experienced the largest decline in the number of Hispanic persons, 75, a 37.5% decline. Atchison County experienced the largest percentage loss, a 58.7% decrease with the number of Hispanic persons decreasing by 61.

The Census Bureau admits that census race data for the 1990 and 2000 census are not directly comparable because individuals could only report one race in the 1990 census and could report multiple races in 2000. However, the differences between 1990 and 2000 for the Hispanic or Latino population were not affected because the Hispanic or Latino population may be of any race.

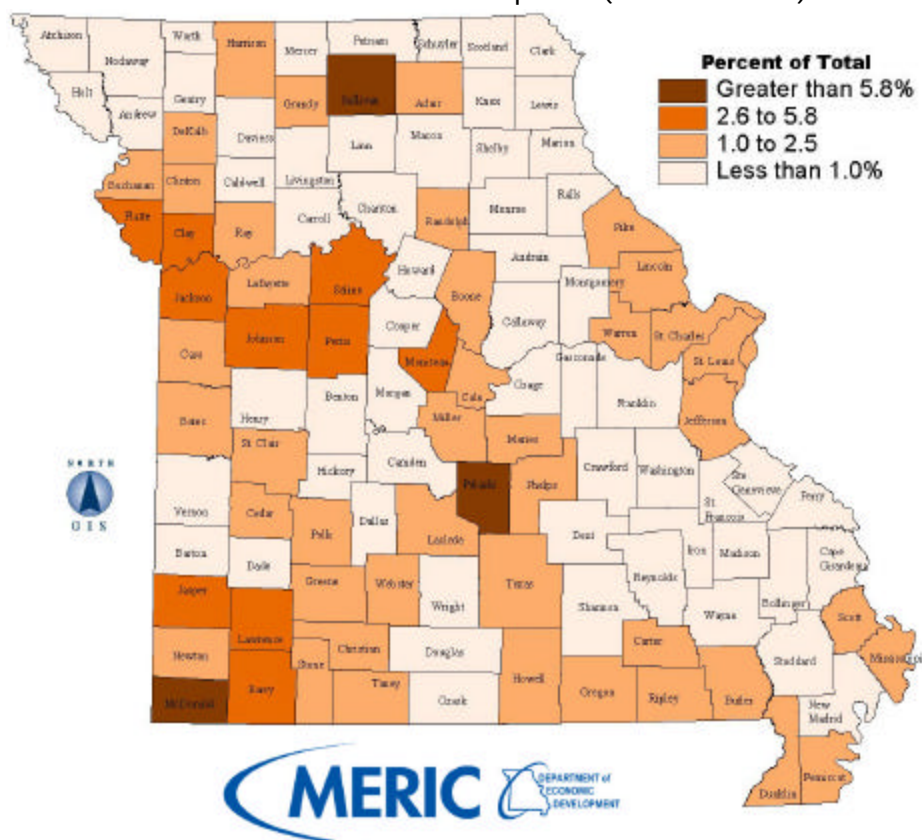
Sullivan (2,164%), McDonald (1,577%), and Barry (1,027%) counties reported enormous percent increases since 1990 in Hispanic population due to expanding employment opportunities. Jackson County reported the largest increase in persons - 16,272, an 86.1% increase; followed by St. Louis County with 4,766, a 48.6% increase; and Clay County with 3,055, an 86.3% increase. Fifty-six of Missouri's 114 counties reported percentage increases from 1990 of over 100%.

Total Hispanic Resident Population of Missouri Counties (Census 2000)

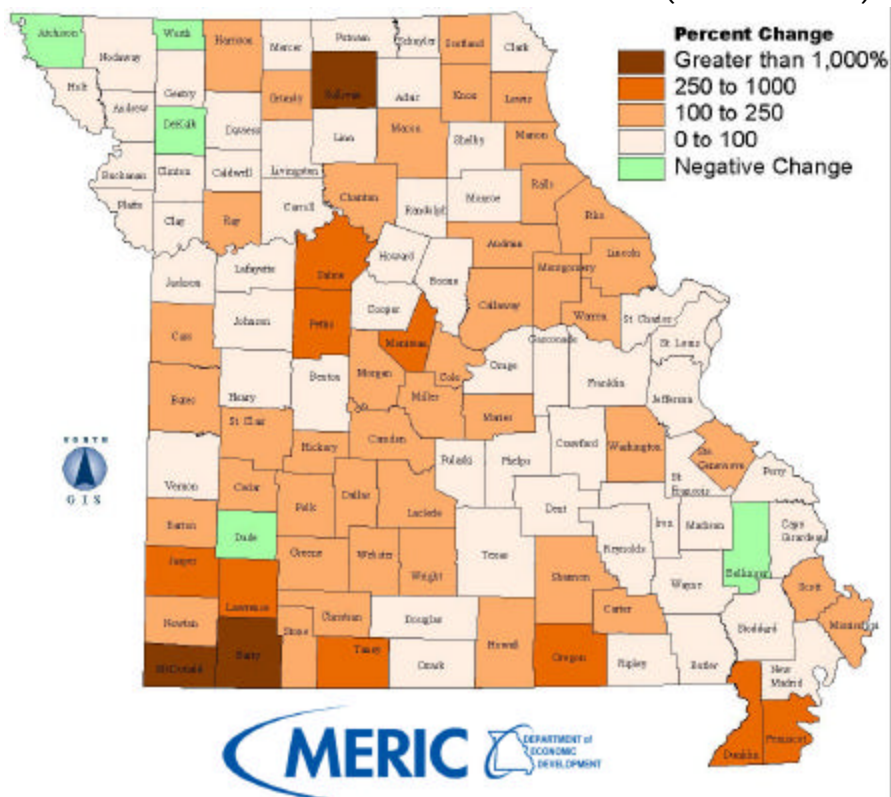


Socio-Demographic Data: Missouri

Percent of Total Resident Population of
Missouri Counties That is Hispanic (Census 2000)



Percent Change in Hispanic Resident Population
for Missouri Counties From 1990 to 2000 (Census 2000)



Socio-Demographic Data: Missouri

Resident Hispanic Population in Missouri by HIV Region and County in 2000 and 1990, and Change in Hispanic Population From 1990 To 2000 (Census 2000)

1990-2000 Change					
HIV Region	County	2000	1990	% Change from 1990	Total Change from 1990
	Missouri	118,592	61,698	92.2%	56,894
Kansas City	Bates	179	82	118.3%	97
Kansas City	Benton	153	78	96.2%	75
Kansas City	Cass	1,816	829	119.1%	987
Kansas City	Clay	6,594	3,539	86.3%	3,055
Kansas City	Henry	201	144	39.6%	57
Kansas City	Jackson	35,160	18,888	86.1%	16,272
Kansas City	Johnson	1,407	709	98.4%	698
Kansas City	Lafayette	386	219	76.3%	167
Kansas City	Platte	2,211	1,161	90.4%	1,050
Kansas City	Ray	253	119	112.6%	134
North Central	Adair	315	182	73.1%	133
North Central	Audrain	189	81	133.3%	108
North Central	Boone	2,413	1,226	96.8%	1,187
North Central	Callaway	377	171	120.5%	206
North Central	Camden	346	170	103.5%	176
North Central	Chariton	47	19	147.4%	28
North Central	Clark	52	26	100.0%	26
North Central	Cole	915	447	104.7%	468
North Central	Cooper	143	96	49.0%	47
North Central	Gasconade	64	35	82.9%	29
North Central	Howard	88	45	95.6%	43
North Central	Knox	26	9	188.9%	17
North Central	Lewis	77	26	196.2%	51
North Central	Linn	104	94	10.6%	10
North Central	Macon	121	59	105.1%	62
North Central	Maries	103	40	157.5%	63
North Central	Marion	252	118	113.6%	134
North Central	Miller	231	101	128.7%	130
North Central	Moniteau	435	46	845.7%	389
North Central	Monroe	52	48	8.3%	4
North Central	Montgomery	94	45	108.9%	49
North Central	Morgan	161	69	133.3%	92
North Central	Osage	77	56	37.5%	21
North Central	Pettis	1,527	269	467.7%	1,258
North Central	Pike	295	119	147.9%	176
North Central	Putnam	32	24	33.3%	8
North Central	Ralls	42	14	200.0%	28
North Central	Randolph	282	179	57.5%	103

Socio-Demographic Data: Missouri

1990-2000 Change					
HIV Region	County	2000	1990	% Change from 1990	Total Change from 1990
North Central	Saline	1,050	208	404.8%	842
North Central	Schuyler	27	18	50.0%	9
North Central	Scotland	42	12	250.0%	30
North Central	Shelby	43	23	87.0%	20
North Central	Sullivan	634	28	2164.3%	606
Northwest	Andrew	138	103	34.0%	35
Northwest	Atchison	43	104	-58.7%	-61
Northwest	Buchanan	2,086	1,706	22.3%	380
Northwest	Caldwell	67	50	34.0%	17
Northwest	Carroll	73	40	82.5%	33
Northwest	Clinton	205	139	47.5%	66
Northwest	Daviess	55	46	19.6%	9
Northwest	DeKalb	125	200	-37.5%	-75
Northwest	Gentry	44	27	63.0%	17
Northwest	Grundy	165	77	114.3%	88
Northwest	Harrison	89	37	140.5%	52
Northwest	Holt	21	16	31.3%	5
Northwest	Livingston	94	63	49.2%	31
Northwest	Mercer	11	7	57.1%	4
Northwest	Nodaway	155	135	14.8%	20
Northwest	Worth	7	9	-22.2%	-2
Southeast	Bollinger	68	70	-2.9%	-2
Southeast	Butler	412	217	89.9%	195
Southeast	Cape Girardeau	624	313	99.4%	311
Southeast	Carter	72	33	118.2%	39
Southeast	Crawford	176	114	54.4%	62
Southeast	Dunklin	824	169	387.6%	655
Southeast	Iron	62	44	40.9%	18
Southeast	Madison	66	62	6.5%	4
Southeast	Mississippi	129	40	222.5%	89
Southeast	New Madrid	183	93	96.8%	90
Southeast	Pemiscot	315	89	253.9%	226
Southeast	Perry	93	72	29.2%	21
Southeast	Reynolds	55	28	96.4%	27
Southeast	Ripley	132	78	69.2%	54
Southeast	Scott	448	206	117.5%	242
Southeast	St. Francois	447	239	87.0%	208
Southeast	Ste. Genevieve	132	49	169.4%	83
Southeast	Stoddard	231	132	75.0%	99

1990-2000 Change					
HIV Region	County	2000	1990	% Change from 1990	Total Change from 1990
Southeast	Washington	170	83	104.8%	87
Southeast	Wayne	65	44	47.7%	21
Southwest	Barry	1,713	152	1027.0%	1,561
Southwest	Barton	119	57	108.8%	62
Southwest	Cedar	153	58	163.8%	95
Southwest	Christian	714	216	230.6%	498
Southwest	Dade	67	76	-11.8%	-9
Southwest	Dallas	147	65	126.2%	82
Southwest	Dent	112	89	25.8%	23
Southwest	Douglas	110	90	22.2%	20
Southwest	Greene	4,434	1,775	149.8%	2,659
Southwest	Hickory	68	29	134.5%	39
Southwest	Howell	450	161	179.5%	289
Southwest	Jasper	3,615	797	353.6%	2,818
Southwest	Laclede	401	141	184.4%	260
Southwest	Lawrence	1,195	211	466.4%	984
Southwest	McDonald	2,030	121	1577.7%	1,909
Southwest	Newton	1,147	353	224.9%	794
Southwest	Oregon	113	32	253.1%	81
Southwest	Ozark	90	56	60.7%	34
Southwest	Phelps	485	303	60.1%	182
Southwest	Polk	350	173	102.3%	177
Southwest	Pulaski	2,404	1,953	23.1%	451
Southwest	Shannon	77	22	250.0%	55
Southwest	St. Clair	95	33	187.9%	62
Southwest	Stone	298	114	161.4%	184
Southwest	Taney	962	194	395.9%	768
Southwest	Texas	221	113	95.6%	108
Southwest	Vernon	172	102	68.6%	70
Southwest	Webster	400	140	185.7%	260
Southwest	Wright	139	61	127.9%	78
St. Louis	Franklin	678	441	53.7%	237
St. Louis	Jefferson	2,002	1,151	73.9%	851
St. Louis	Lincoln	444	219	102.7%	225
St. Louis	St. Charles	4,176	2,308	80.9%	1,868
St. Louis	St. Louis	14,577	9,811	48.6%	4,766
St. Louis	St. Louis City	7,022	5,124	37.0%	1898
St. Louis	Warren	314	152	106.6%	162

Socio-Demographic Data: Missouri

Missouri Minority Populations: American Indians

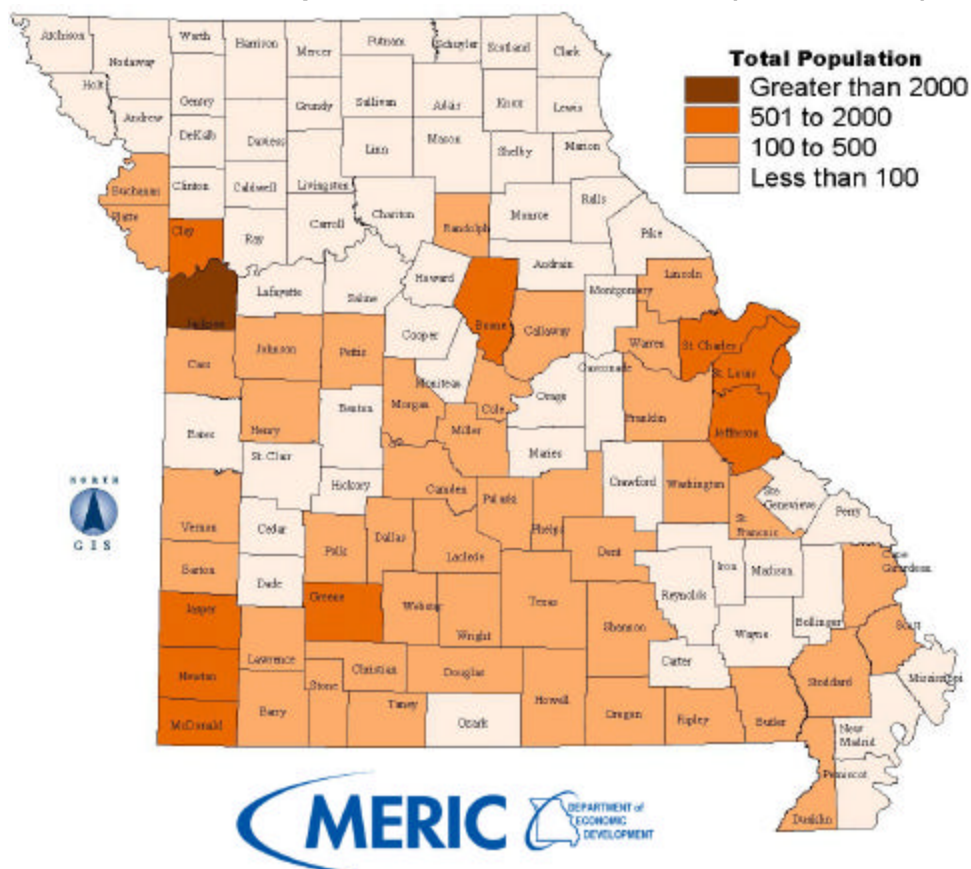
According to the 2000 Census figures, Missouri's population is more diverse than ever, especially urban areas. Missouri's American Indian and Alaska Native race category experienced the second largest percent increase for Missouri minority populations, 24%, growing from 20,221 in 1990 to 25,076 in 2000. Missouri's total population grew by 9.3% from just over 5.1 million in 1990 to slightly under 5.6 million in 2000.

Jackson County, St. Louis County, and Green County led Missouri in American Indian and Alaska Native populations with 3,168, 1,717, and 1,583 persons respectively. Scotland, Putnam, and Knox counties reported Missouri's smallest American Indian and Alaska Native population with populations of 7, 5, and 1 respectively. Green County reported the largest increase in population with a growth of 290 persons, a 22.4% increase since 1990. Worth County reported the largest percent increase, 700%, growing from a population of 1 in 1990 to 8 in 2000. Overall, 21 Missouri counties experienced a percent increase since 1990 of 100% or higher

Not all of Missouri counties experienced positive growth in the Native and Alaskan Indian populations. Jasper County reported the largest decline, losing 127, in Native and Alaskan Indian persons. Ray County and St. Louis City reported losses of 29 and 21 persons respectively. Knox, Putnam and Gentry counties reported the largest percentage decrease in Native and Alaskan populations with 90%, 44.4%, and 40% respectively. Overall 21 Missouri counties reported negative growth, while only Marion County reported no change in populations.

Census data for the 1990 and 2000 census are not directly comparable because individuals could report only one race in the 1990 census and could report multiple races in 2000. Thus the difference in population is due to both the changes in the census questionnaire and to real population change.

Total Indian Resident Population of Missouri Counties (Census 2000)



Missouri Minority Populations: Asian/Pacific Islanders

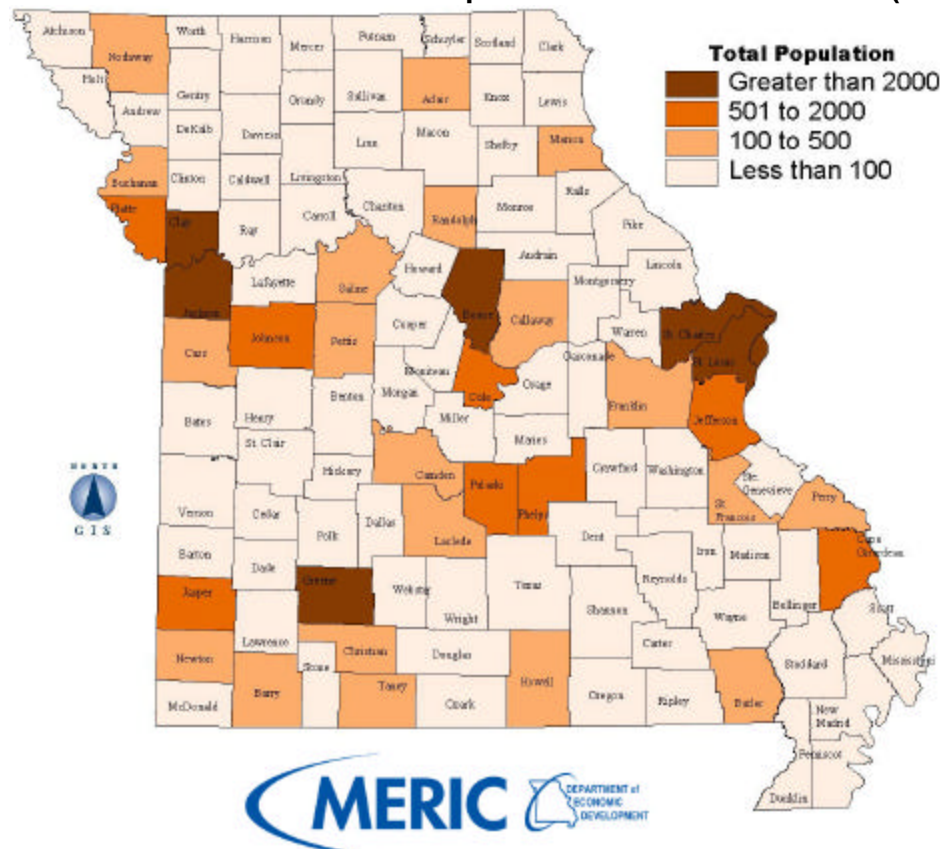
According to the 2000 Census figures, Missouri's population is more diverse than ever, especially urban areas. Missouri's Asian and Pacific Islander race category experienced the largest percent increase, 55.1% growing from 41,758 in 1999 to 64,773 in 2000. Missouri's total population grew by 9.3% from just over 5.1 million in 1990 to slightly under 5.6 million in 2000.

St. Louis County, Jackson County and St. Louis City lead Missouri in Asian and Pacific Islander populations with 22,857, 9,580, and 6,985 persons respectively. Knox, Mercer, and Worth Counties reported Missouri's smallest Asian and Pacific Islander populations with populations of 4, 2, and 2, respectively. St. Louis County reported the largest increase in the Asian and Pacific Islander population with a growth of 8,629 persons, a 60.6% increase since 1990. Sullivan County reported the largest percent increase, 650%, growing from a population of 2 in 1990 to 15 in 2000. Overall, 18 Missouri counties reported a percent increase since 1990 of 100% or higher.

Not all of Missouri's counties experienced positive change in Asian and Pacific Islander population. Pulaski County reported the largest decrease in persons, 199, a 15.7% decrease. Polk and Stoddard Counties both reported a loss of 16 persons. Worth, DeKalb, and Atchison Counties reported the largest percentage decreases with 60%, 40%, and 35.7%, respectively. Overall, 17 Missouri counties reported negative growth, while 4 reported no change, in Asian and Pacific Islander populations.

Census data for the 1990 and 2000 census are not directly comparable because individuals could report only one race in the 1990 census and could report multiple races in 2000. Thus the difference in population is due to both the changes in the census questionnaire and to real population change.

Total Asian/Pacific Islander Resident Population of Missouri Counties (Census 2000)

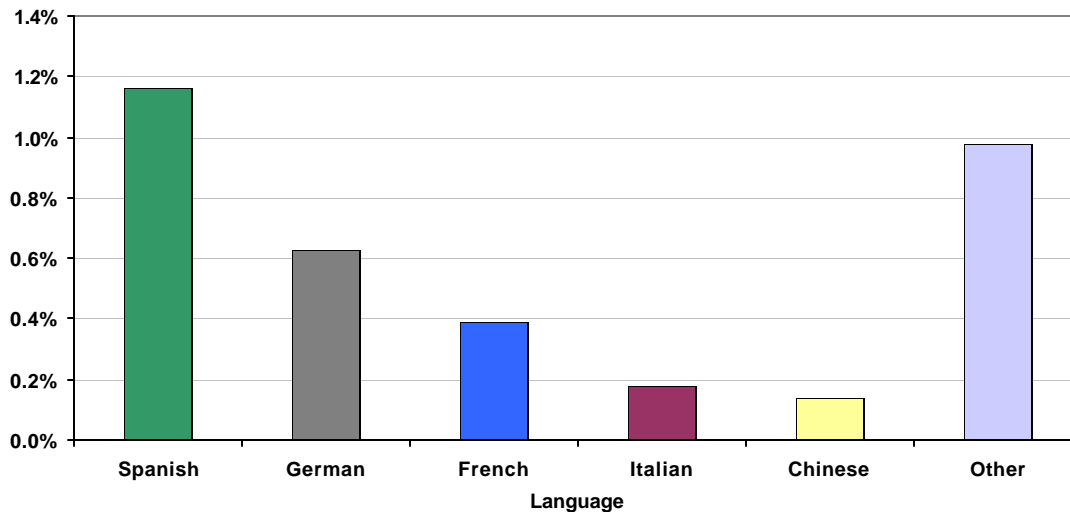


Socio-Demographic Data: Missouri

The Many Languages of Missouri

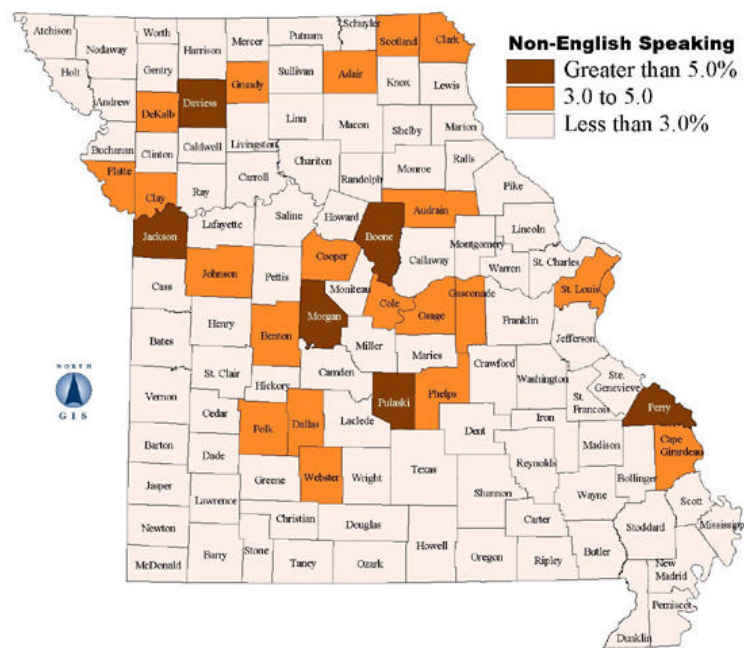
According to the 1990 Census, 3.48 percent (178,210) of Missouri's population spoke a language other than English in the home. The five most common languages spoken in the home were Spanish or Spanish Creole (1.16 percent), German (0.63 percent), French or French Creole (0.39 percent), Italian (0.18 percent), and Chinese (0.14 percent).

Percent of 1990 Missouri Population Having Non-English Languages Spoken in the Home



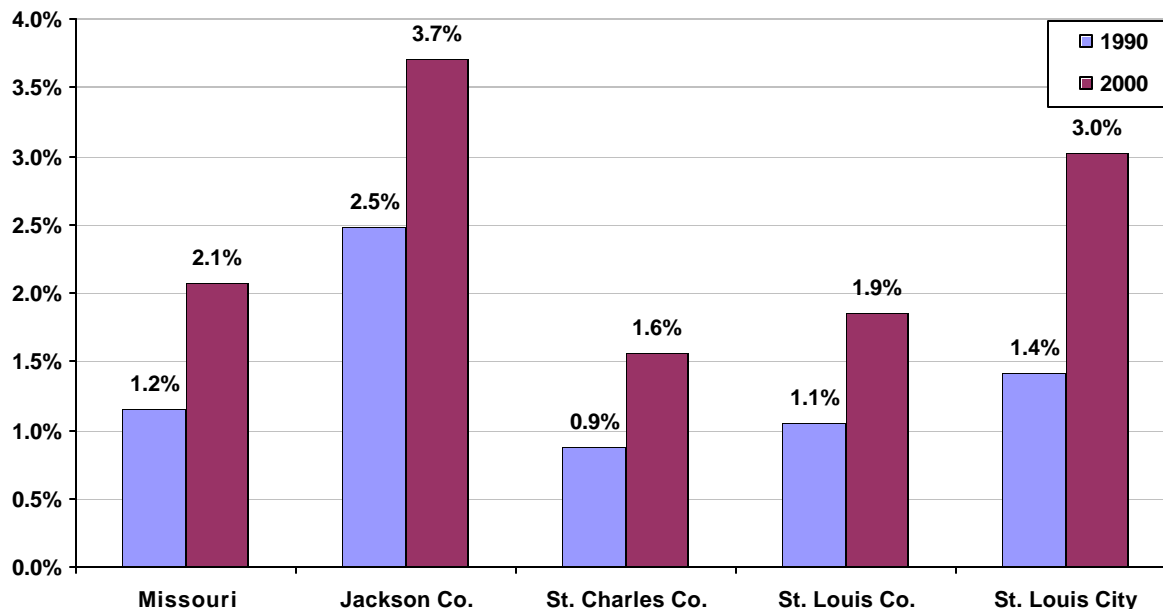
Within Missouri, the counties with the largest percentages of non-English speaking households in 1990 were Pulaski (8.32 percent), Daviess (7.51 percent), Morgan (6.77 percent), Perry (5.94 percent), Boone (5.81 percent) and Jackson (5.11 percent).

Percent of the 1990 Population of Missouri Counties Having Non-English Language Spoken in the Home



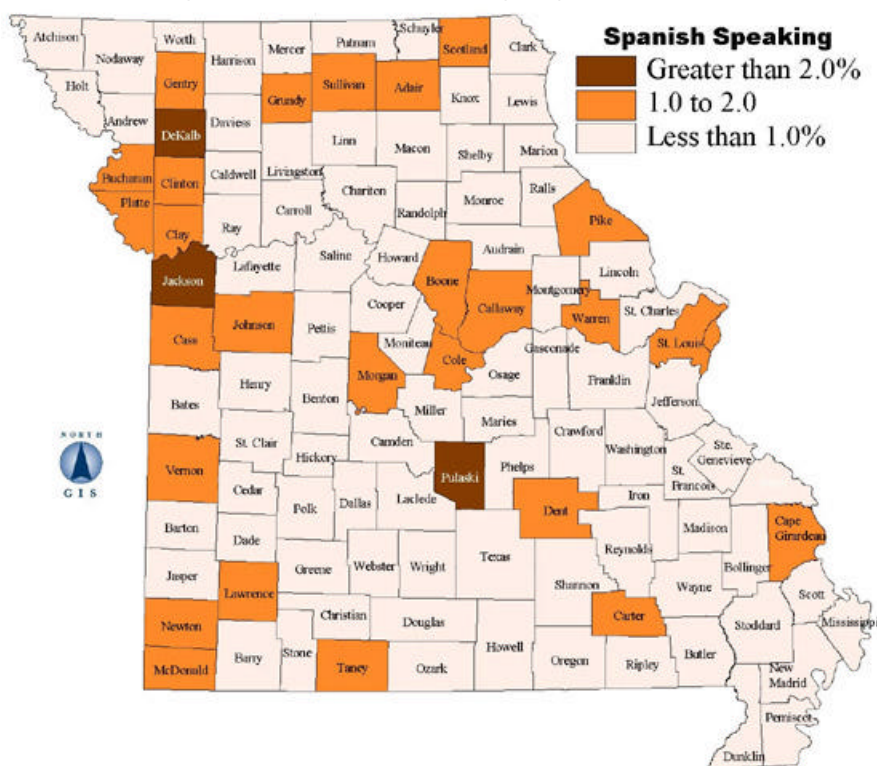
Spanish is the most common non-English language in Missouri. Data from the 1990 Census and 2000 Census estimates show that not only is Spanish dominant versus other non-English languages in Missouri, but also growing as a language used in the home.

Percent of Population with Spanish as Language Spoken in the Home, Missouri and Selected Missouri Counties



Counties in 1990 with the largest percentages of households speaking Spanish as the “language in the home” were Pulaski (2.92 percent), Jackson (2.48 percent), and Dekalb (2.05 percent) Counties.

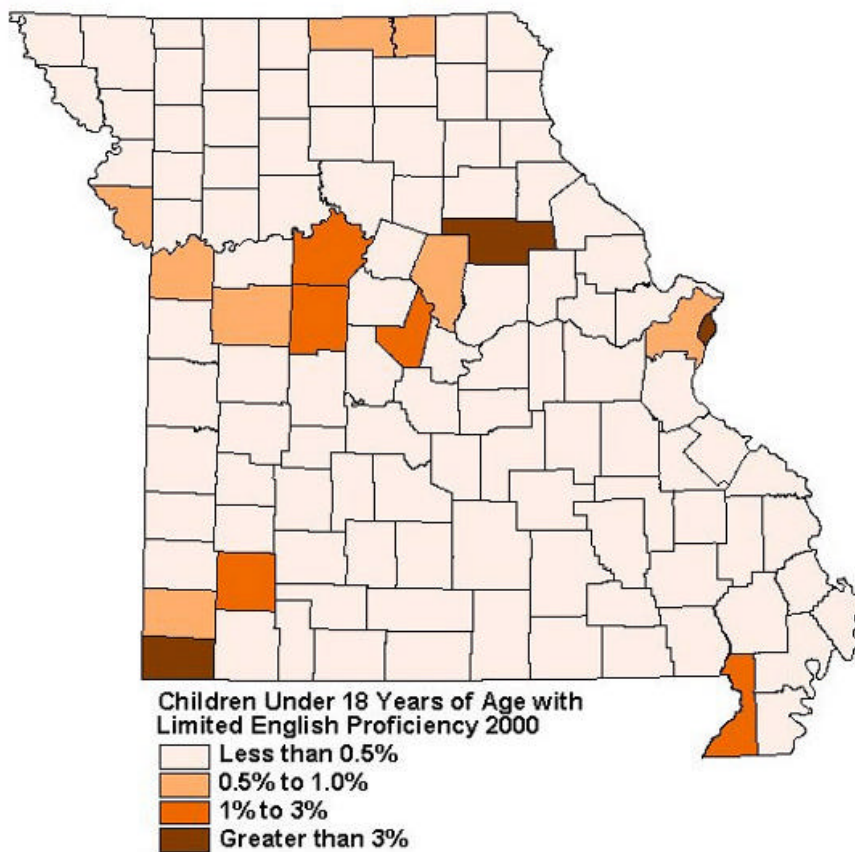
Percent of 1990 Population of Missouri Counties Having Spanish as the "Language in the Home"



Socio-Demographic Data: Missouri

In Missouri, there are areas of Limited English Proficiency in children under 18 years of age found in counties across the state. According to data analyzed by MERIC (compiled from the Missouri Departments of Social Services and Elementary and Secondary Education, and Office of Administration), in 2000, the percent of children under 18 in Missouri that have limited English language proficiency was approximately 0.6 percent of the total under age 18 population. The most heavily concentrated areas of Limited English Proficiency are along the I-70 corridor, around Kansas City and St. Louis, and in extreme southwest Missouri.

Percent of the Population of Missouri Counties in 2000
Having Children Under 18 With Limited English Proficiency



1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

1999 Missouri Behavioral Risk Factor Surveillance System (BRFSS): Results From Selected HIV/AIDS-Related Questions

The Missouri Behavioral Risk Factor Surveillance System (BRFSS) is a population-based, random-digit-dialed telephone survey of the state's civilian, noninstitutionalized adult population 18 years of age and older. Interviewers ask questions related to health behaviors, screening, quality of life, mental health, impairment, and access to health care and insurance. The results are weighted by demographic characteristics and by selection probability, and are used in planning, implementing, and evaluating health promotion and disease prevention programs.

In 1999, 4,277 Missouri residents were interviewed for the BRFSS. For the 3,304 (77.3%) participants 18-64 years of age, the interview included questions relating to HIV/AIDS-related knowledge and attitudes, and HIV testing history. The results are summarized on the following pages.

Note: The 1999 BRFSS results will eventually include data for different regions within the state. However, 1999 regional data are not available at the present time. Regional data from the 1998 BRFSS which pertain to HIV/AIDS are summarized in the *1999 Epidemiologic Profiles of HIV/AIDS and STDs in Missouri*¹, beginning on page 53 of the document.

1. This document is available at http://www.health.state.mo.us/HIV_STD/99MainFS.pdf. See also the Missouri Department of Health publication "1998 Behavioral Risk Factor Surveillance System (BRFSS) Regional Data Summary" at <http://www.health.state.mo.us/Publications/98BRFSS.html>.

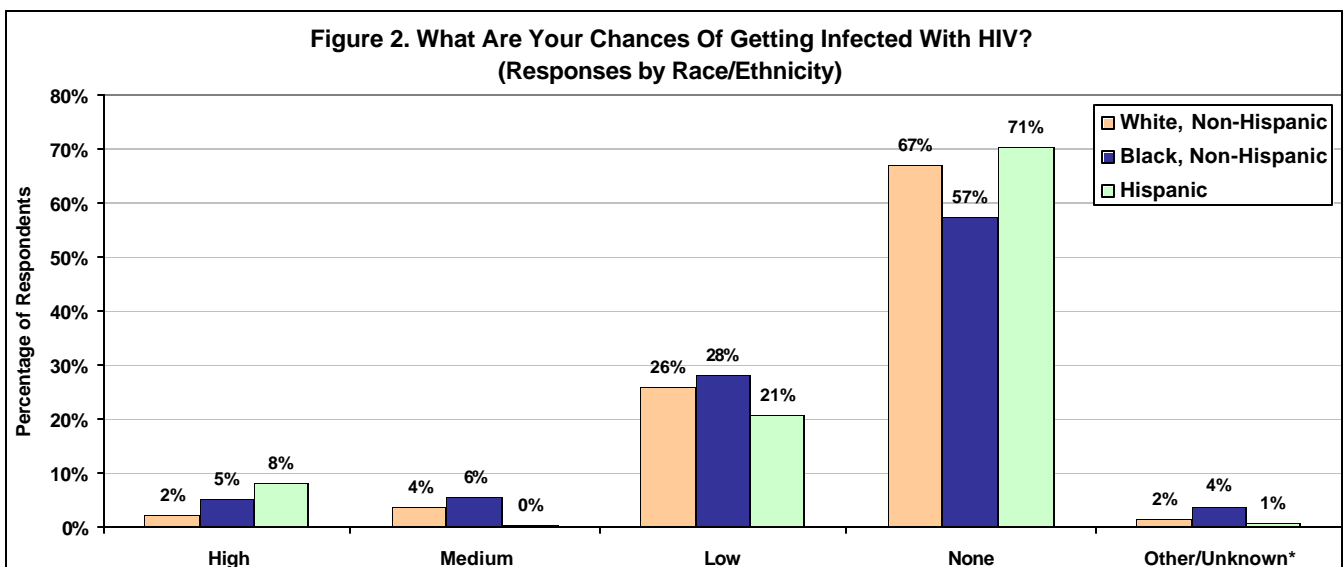
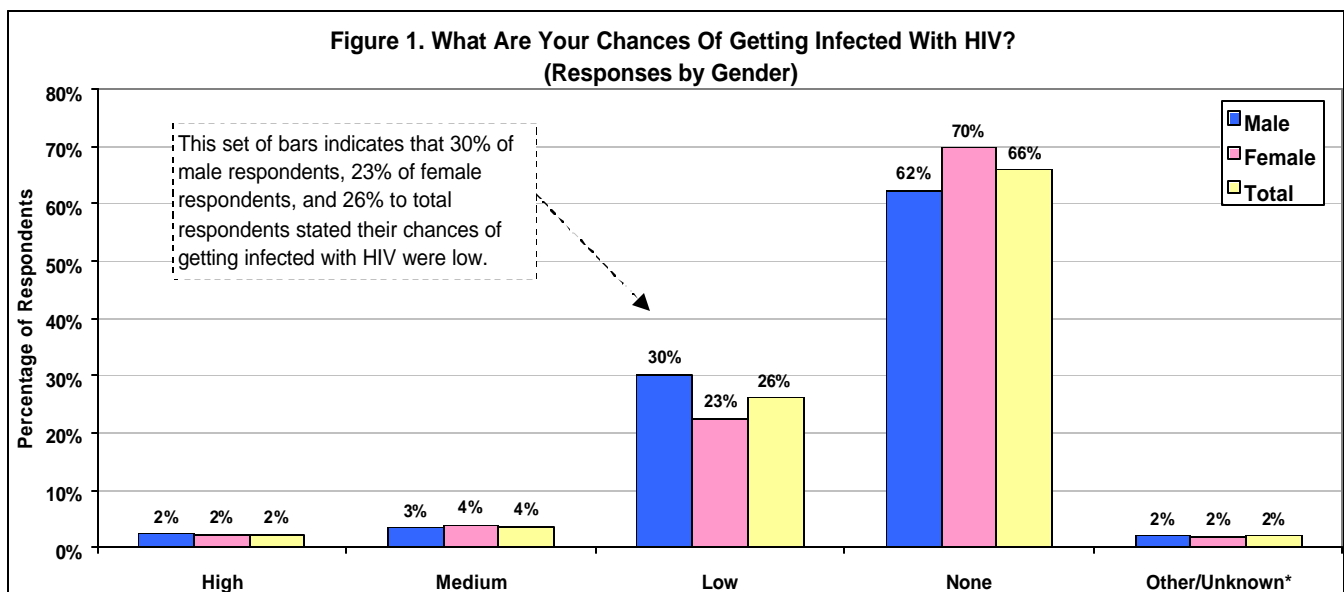
1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

In 1999, the 3,304 Missouri BRFSS participants 18-64 years of age were asked: **“What are your chances of getting infected with HIV?”** The responses are shown in Figures 1-5. The height of each individual bar corresponds to the percentage of respondents in that particular category who gave the indicated response to the question (see the box inside Figure 1 for additional explanation).

Most respondents (92%) believe their chances of becoming infected with HIV are low or none. Only 2% believe their chances of becoming infected are high, and another 4% believe their chances of infection are medium. Females are slightly more likely than males (70% vs. 62%) to indicate they have no chances of becoming infected. Hispanics are slightly more likely than African Americans or white non-Hispanics (8%, vs. 5% and 2%, respectively) to state that their chances of becoming infected with HIV are high.

In general, persons in younger age groups are more likely to perceive themselves at relatively higher risk than those in older age groups, although only 5% of those in the youngest age group (18-24 years old) indicate that they are at high risk of infection.

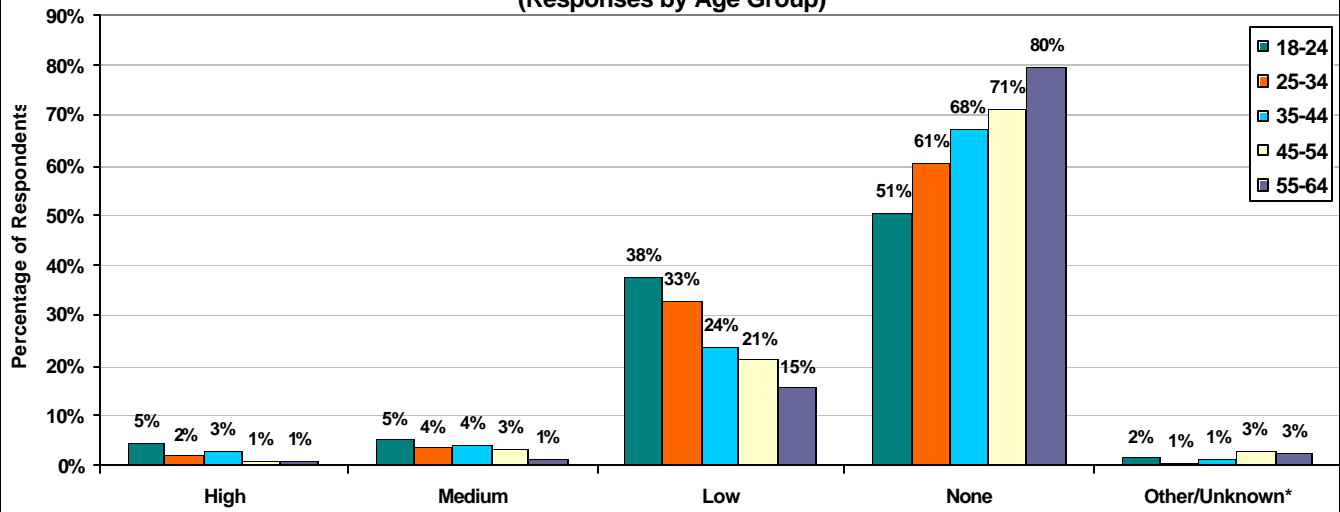
Persons who have not graduated from high school (or obtained a GED) are slightly more likely than those with more education (73% vs. 65%) to indicate they have no chances of becoming infected



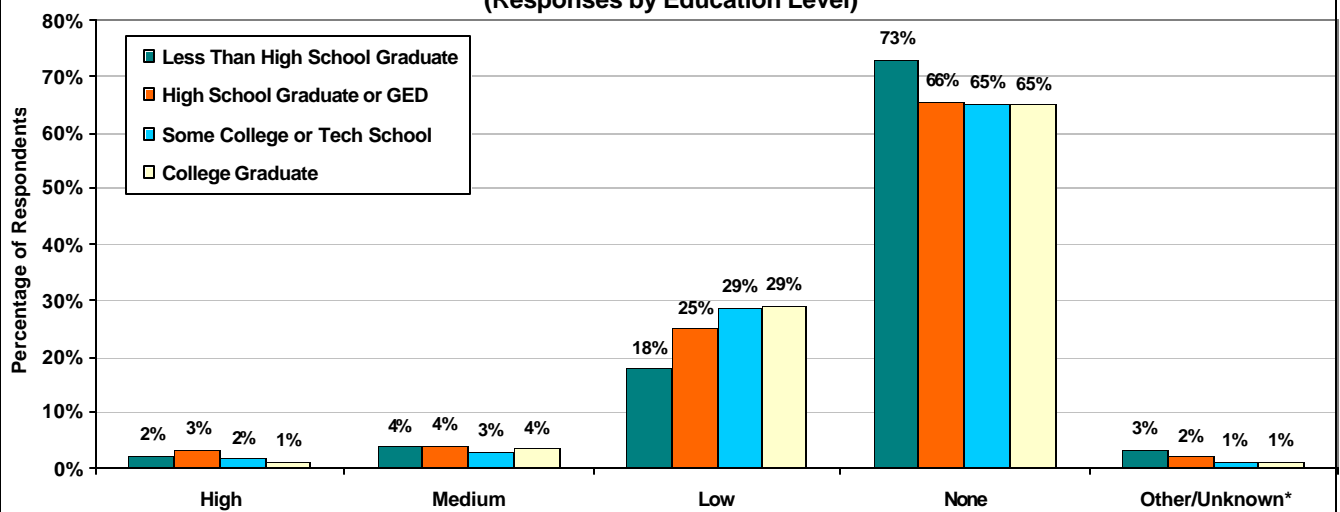
*Includes “Not Applicable” and “Unknown/Refused.”

1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

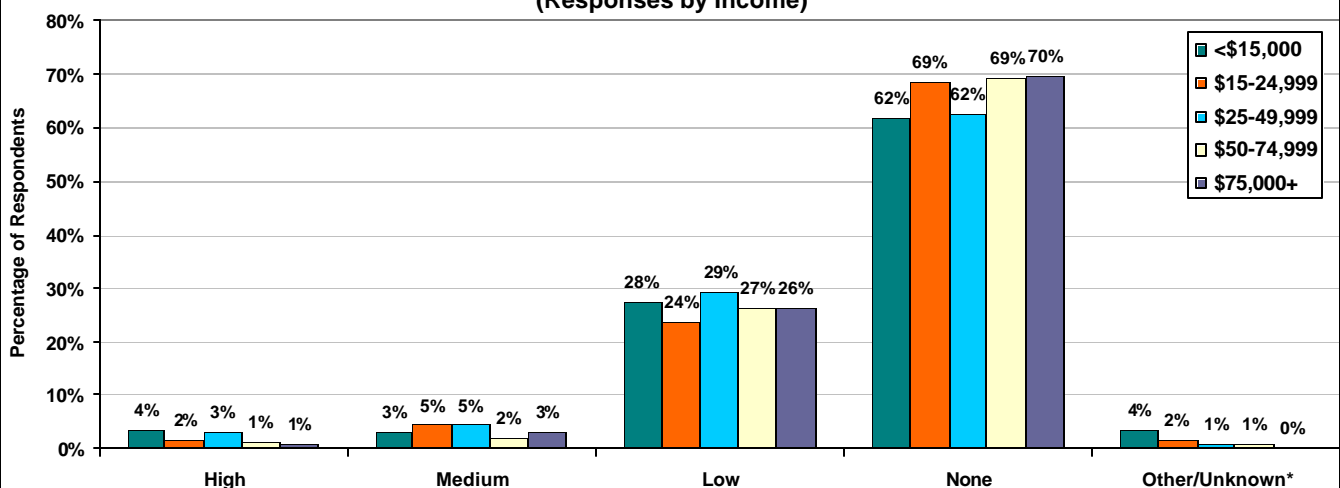
**Figure 3. What Are Your Chances Of Getting Infected With HIV?
(Responses by Age Group)**



**Figure 4. What Are Your Chances Of Getting Infected With HIV?
(Responses by Education Level)**



**Figure 5. What Are Your Chances Of Getting Infected With HIV?
(Responses by Income)**



*Includes "Not Applicable" and "Unknown/Refused."

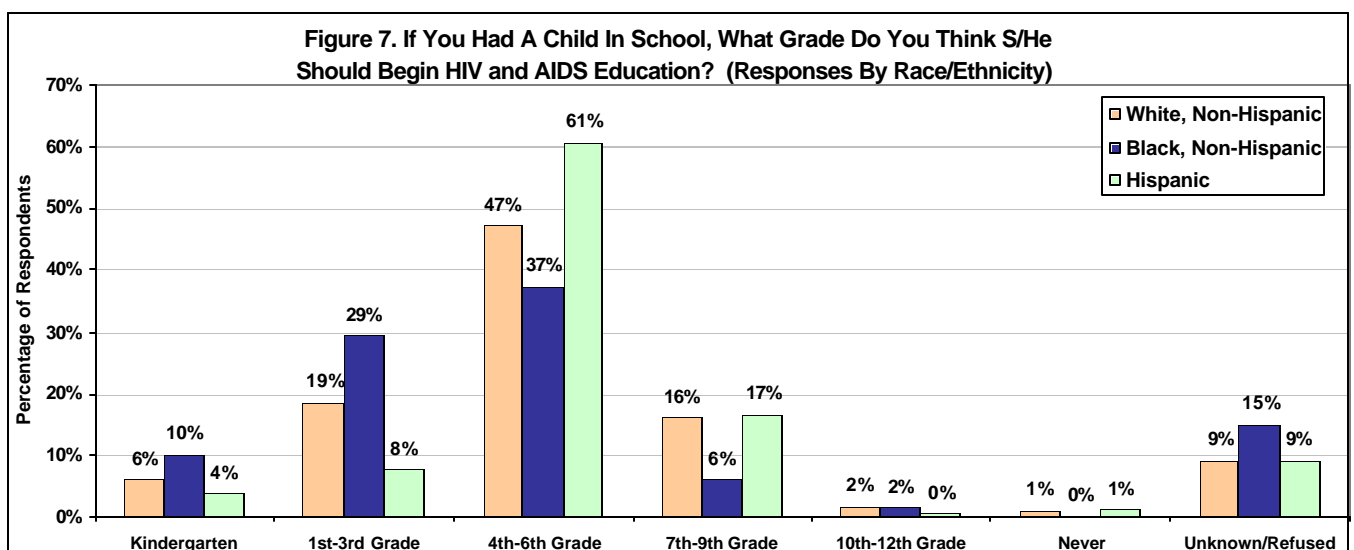
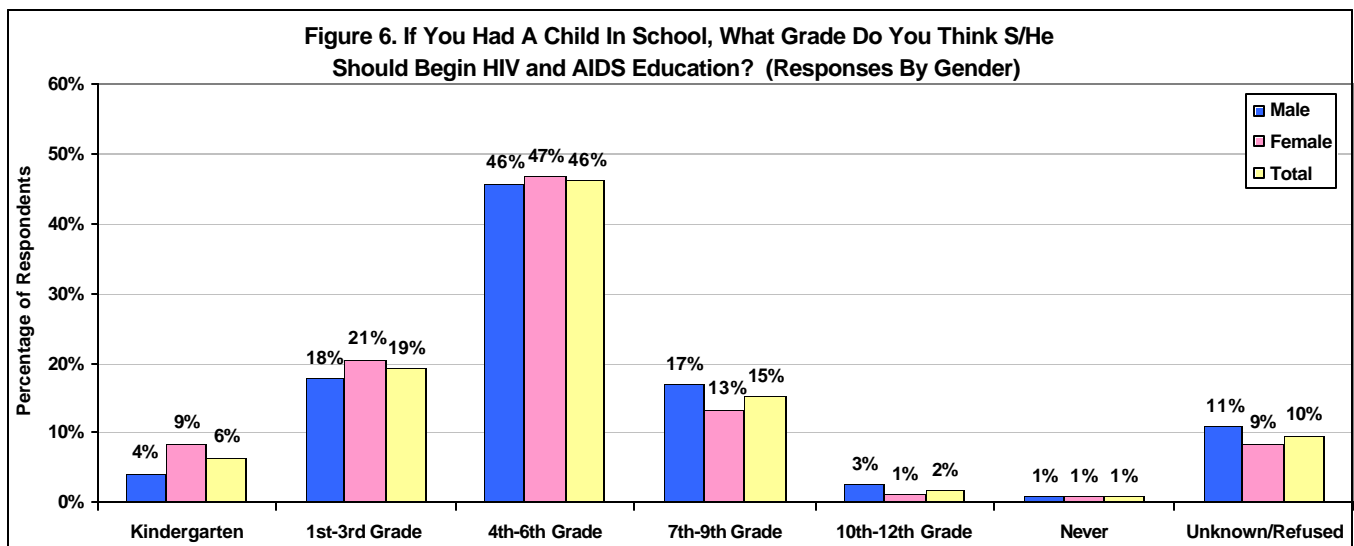
1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

The 3,304 Missouri BRFSS participants 18-64 years of age were asked: **"If you had a child in school, what grade do you think s/he should begin HIV and AIDS education?"** The responses are shown in Figures 6-10. The height of each individual bar corresponds to the percentage of respondents in that particular category who gave the indicated response to the question (see the box inside Figure 1 on page 52 for additional explanation).

Close to half (46%) of respondents indicated they believe HIV/AIDS education should begin in the 4th-6th grade; 19% said such education should begin in the 1st-3rd grade, and 15% stated it should begin in the 7th-9th grade. Only 1% indicated that HIV/AIDS education should not be conducted in a school setting.

African Americans were more likely than white non-Hispanics and Hispanics (39% vs. 25% and 12%, respectively) to indicate that HIV/AIDS education should begin in kindergarten or the 1st-3rd grade. No African American respondent indicated that such education should not take place in a school setting.

Among respondents in each racial/ethnic group, as well as for those in each age group, educational level, and income level, only 1% (or less) stated that HIV/AIDS education should not be conducted in a school setting. Also, regardless of racial/ethnic or age group, or educational or income level, the largest proportion of respondents indicated that HIV/AIDS education should begin in the 4th-6th grade.



1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

Figure 8. If You Had A Child In School, What Grade Do You Think S/He Should Begin HIV and AIDS Education? (Responses By Age Group)

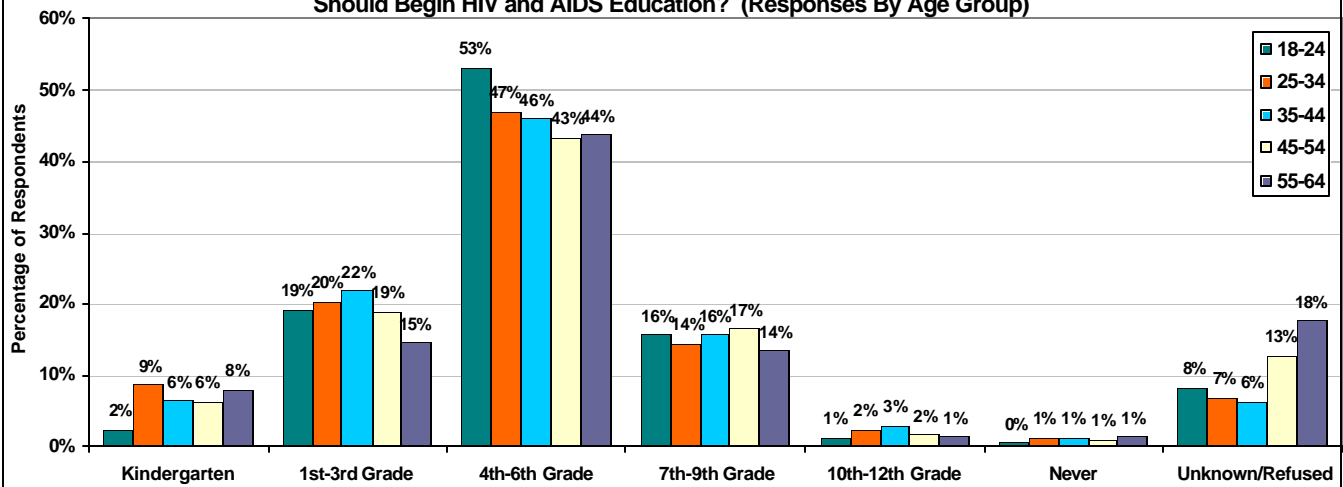


Figure 9. If You Had A Child In School, What Grade Do You Think S/He Should Begin HIV and AIDS Education? (Responses by Education Level)

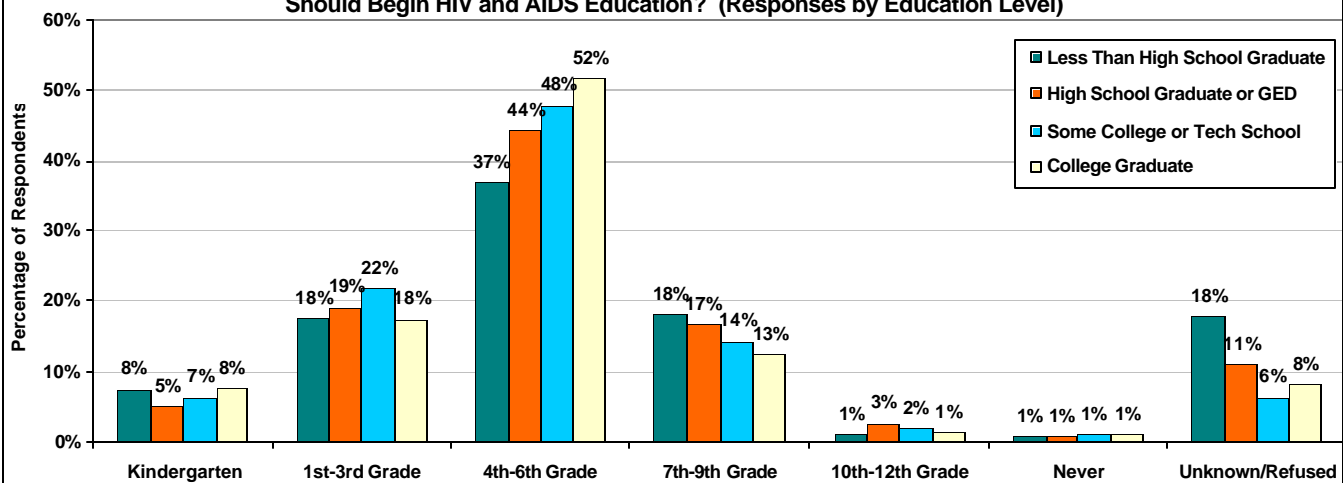
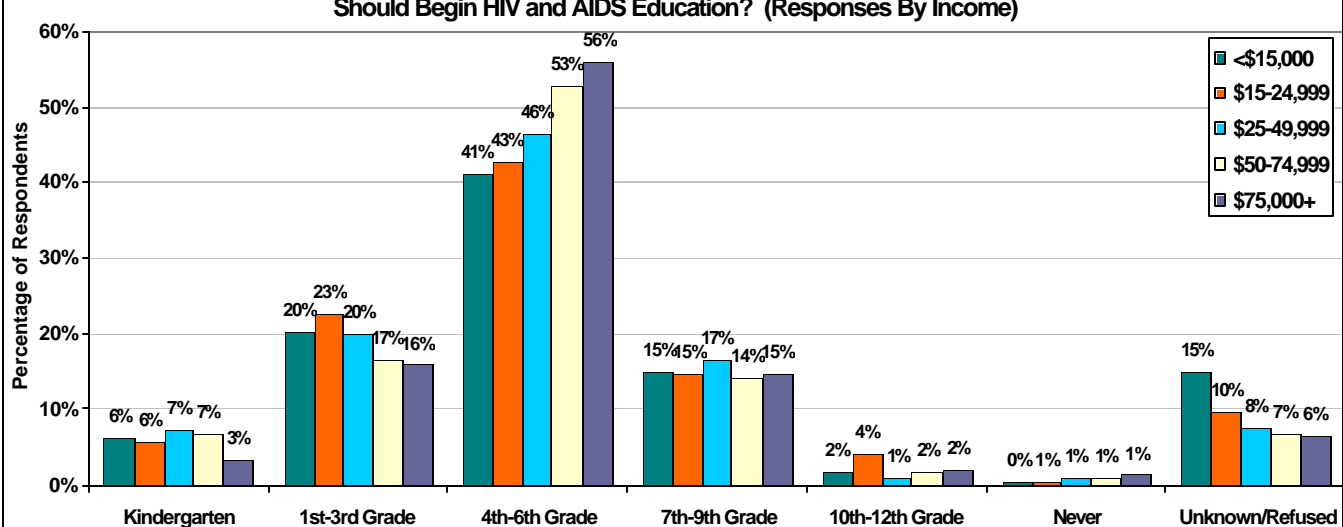


Figure 10. If You Had A Child In School, What Grade Do You Think S/He Should Begin HIV and AIDS Education? (Responses By Income)

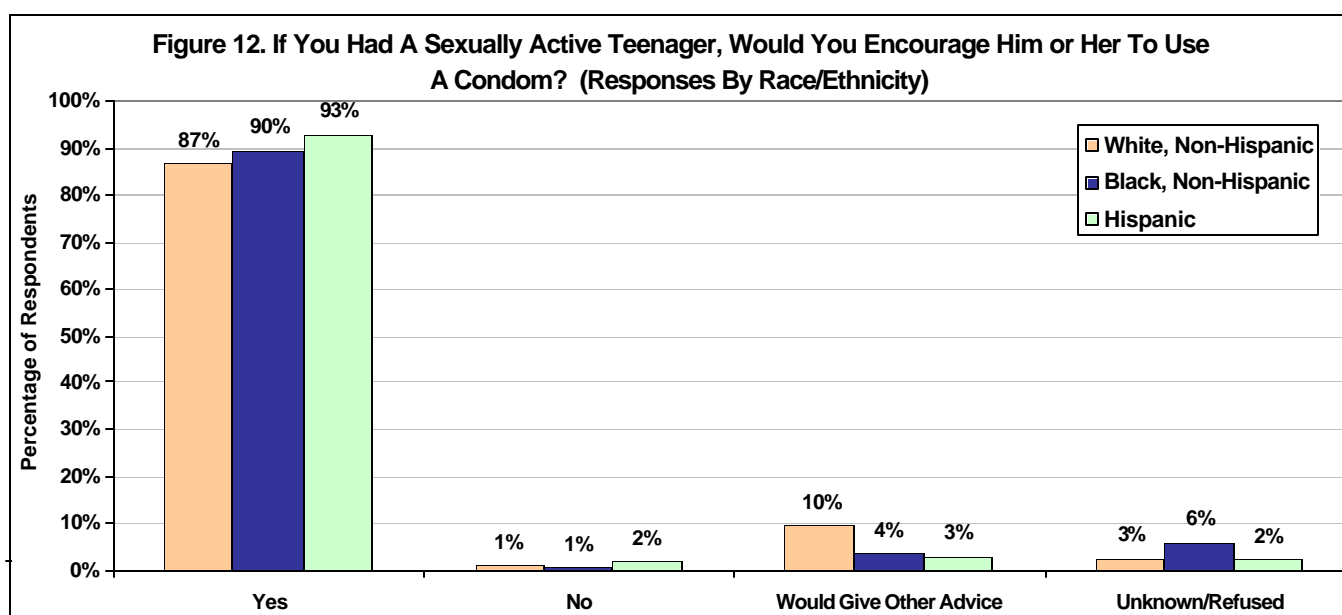
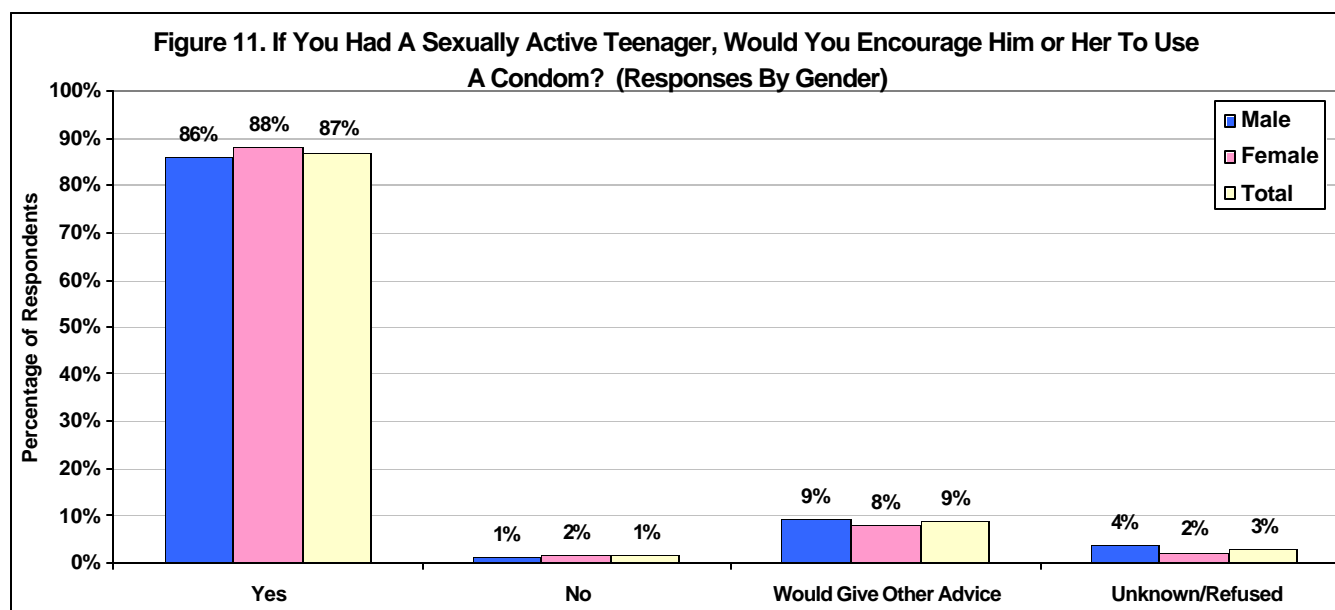


1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

The 3,304 Missouri BRFSS participants 18-64 years of age were asked: **'If you had a sexually active teenager, would you encourage him or her to use a condom?'** The responses are shown in Figures 11-15. The height of each individual bar corresponds to the percentage of respondents in that particular category who gave the indicated response to the question (see the box inside Figure 1 on page 52 for additional explanation).

Most respondents (87%) indicated they would encourage their sexually-active teenager to use a condom. Very few respondents (1%) answered no to the question, although 9% stated they would give other advice besides condom use.

White non-Hispanics were more likely to indicate they would give other advice than were African Americans or Hispanics (10% vs. 4% and 3%, respectively). In addition, it appeared that, in general, the older the respondent, the more likely he or she would chose to give the teenager other advice instead of condom use. However, even among the oldest age group (55-64 years), only 14% indicated they would give other advice, and 80% said they would encourage condom use.



1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

Figure 13. If You Had A Sexually Active Teenager, Would You Encourage Him or Her To Use A Condom? (Responses By Age Group)

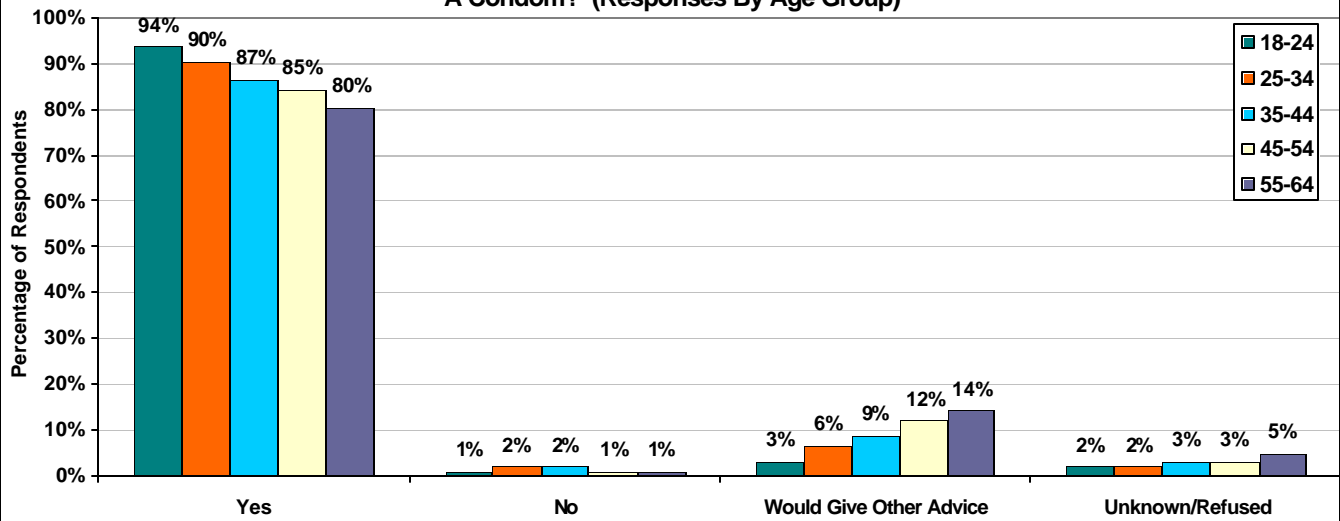


Figure 14. If You Had A Sexually Active Teenager, Would You Encourage Him or Her To Use A Condom? (Responses by Education Level)

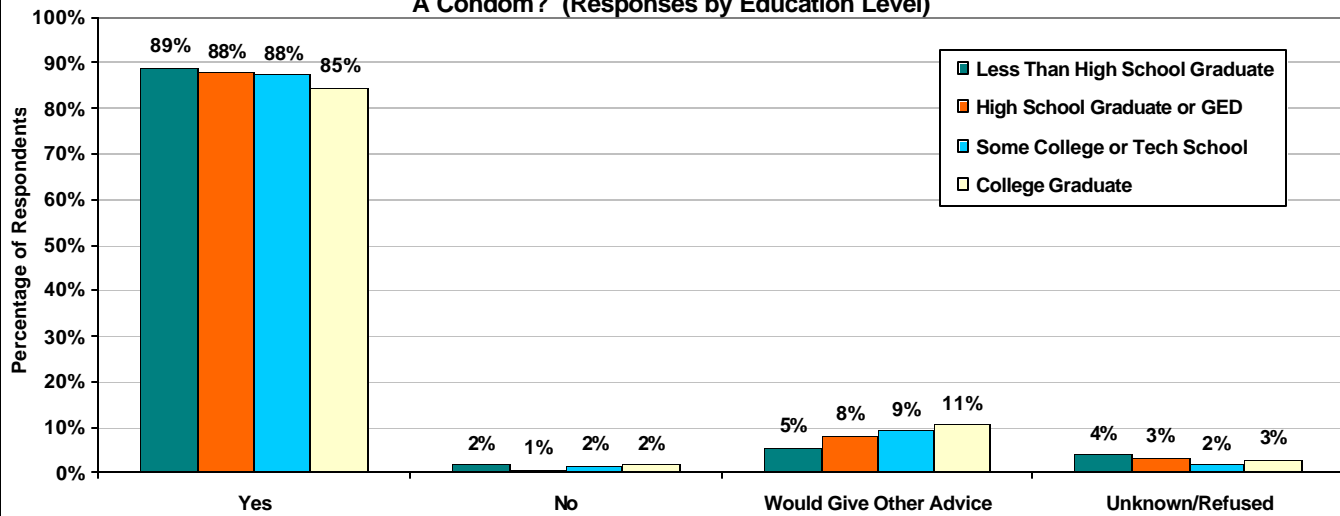
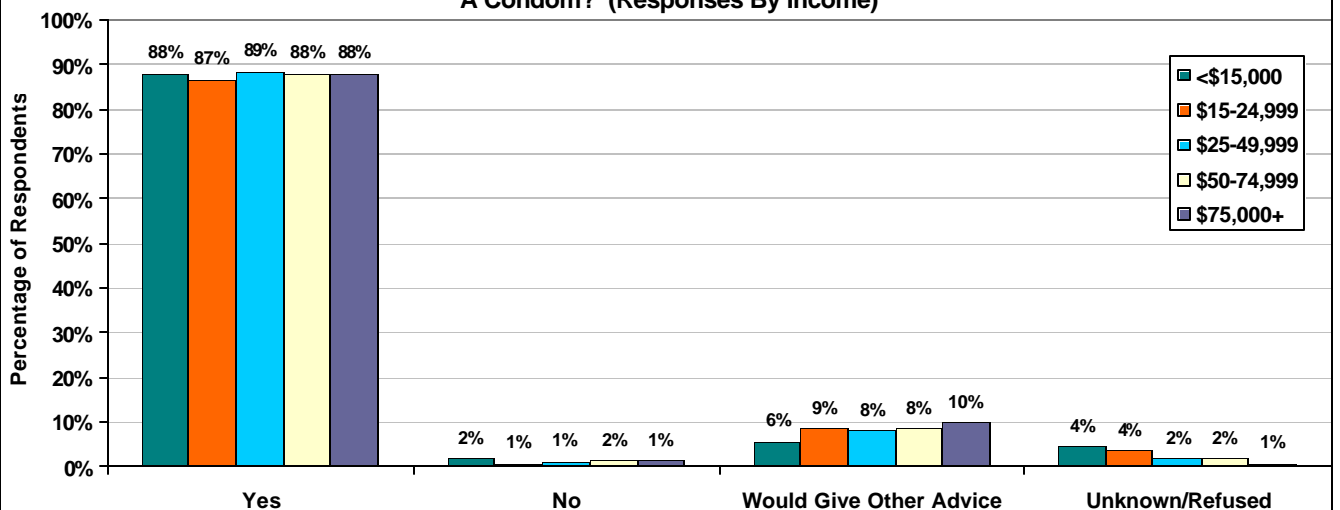


Figure 15. If You Had A Sexually Active Teenager, Would You Encourage Him or Her To Use A Condom? (Responses By Income)

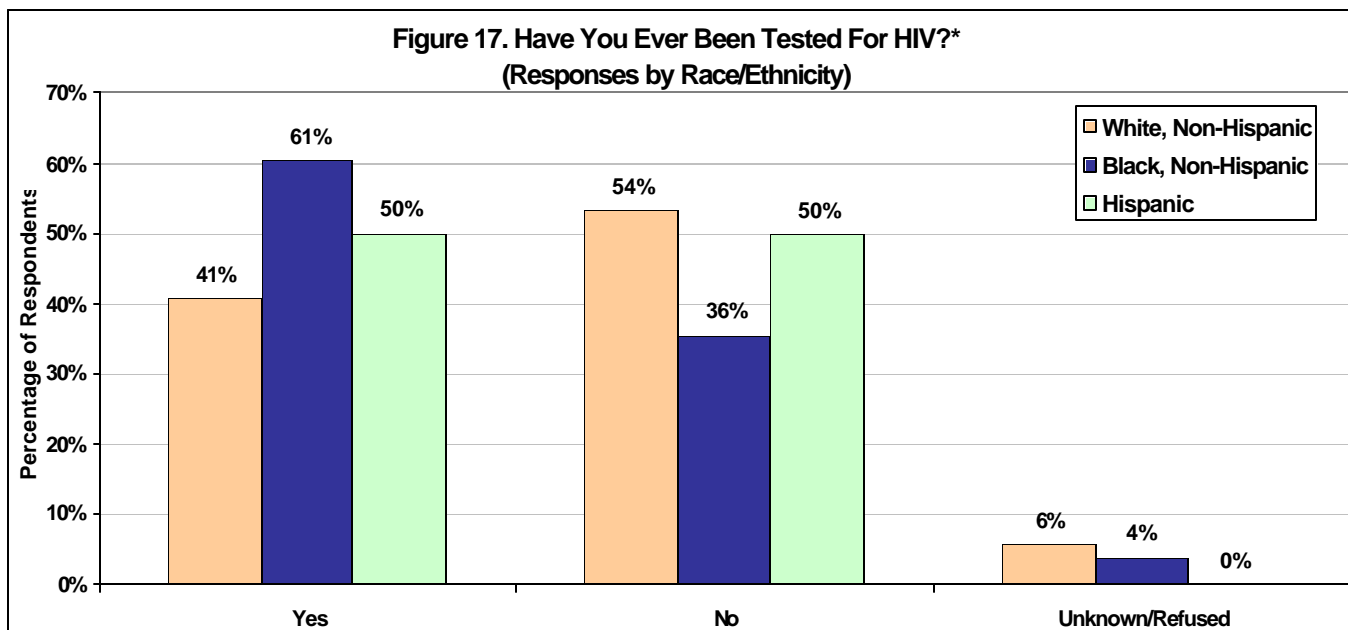
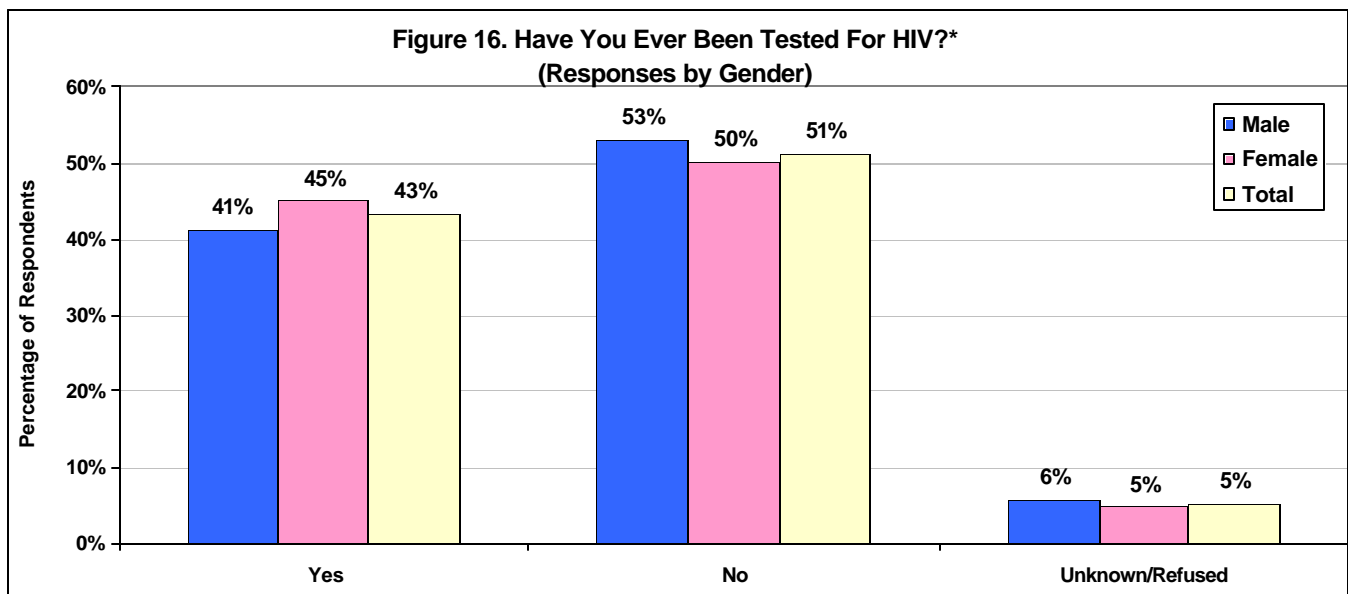


1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

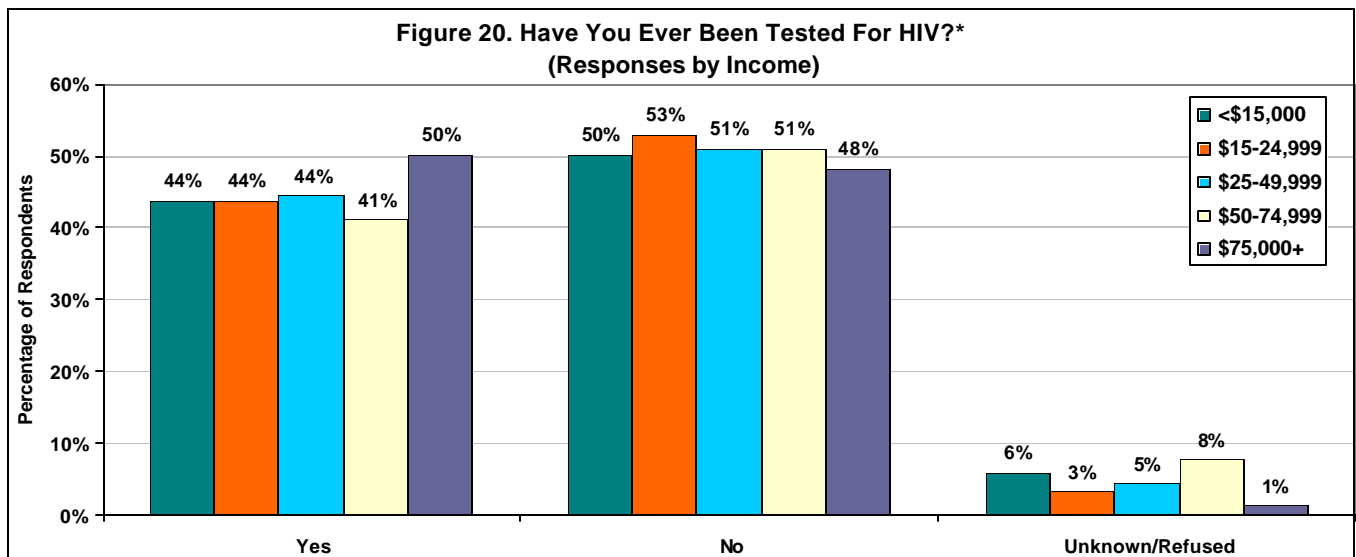
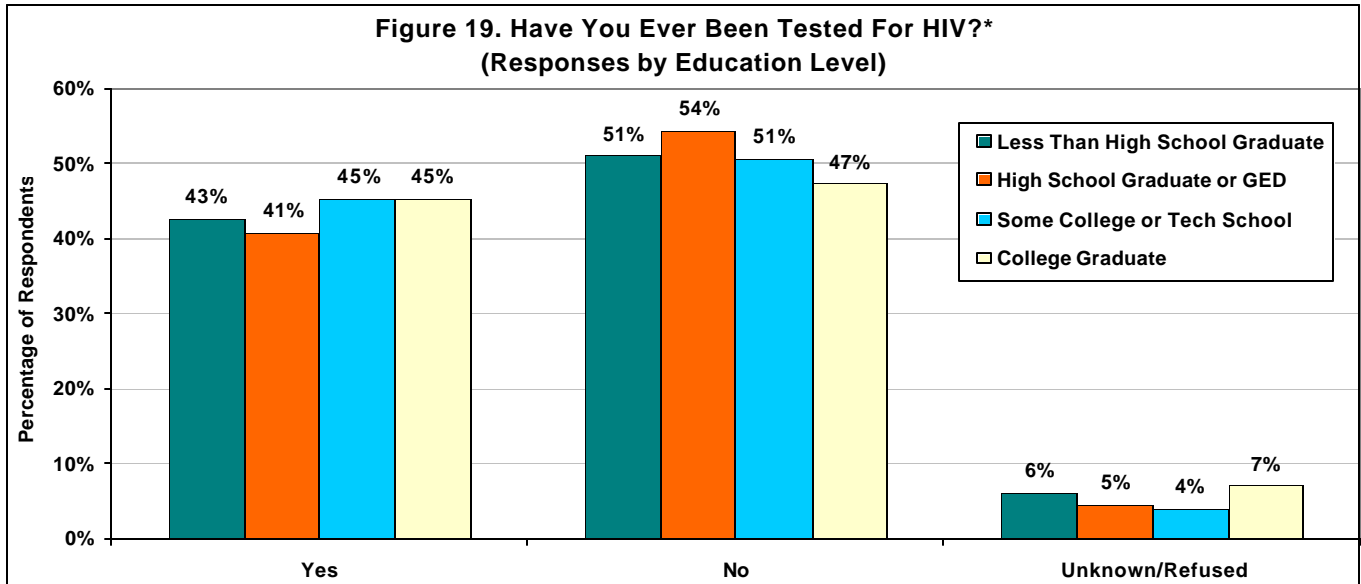
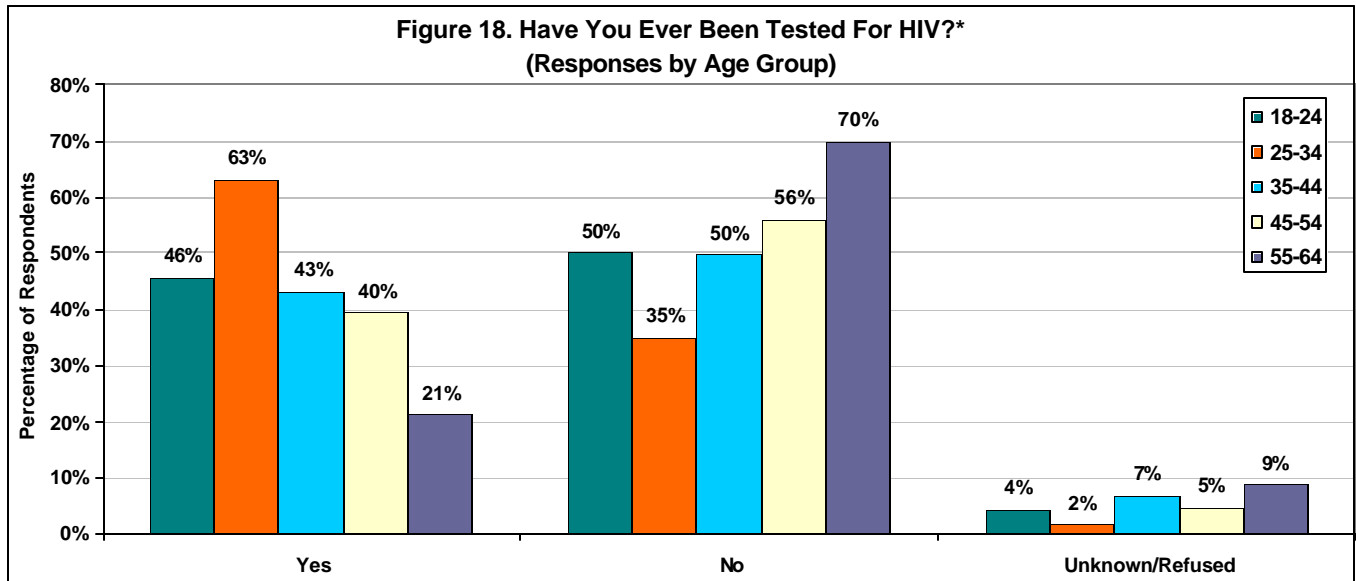
Of the 3,304 Missouri BRFSS participants 18-64 years of age, 3,300 were asked whether they had donated blood since March 1985; 972 (29.8%) stated that they had. The remaining 2,328 individuals, who did not report donating blood since this date, were asked **"Have you ever been tested for HIV?"** The responses are shown in Figures 16-20. The height of each individual bar corresponds to the percentage of respondents in that particular category who gave the indicated response to the question (see the box inside Figure 1 on page 52 for additional explanation).

Forty-three percent of respondents indicated they had been tested for HIV. African Americans were noticeably more likely than Hispanics or white non-Hispanics (61% vs. 50% and 41%, respectively) to have been tested.

Respondents in the 25-34 year age group were most likely to have been tested (63%, vs. 46% for respondents 18-24 years of age, the age group with the next highest proportion who had been tested). Respondents in the oldest age group (55-64 years) were least likely to have been tested (only 21% reported having had an HIV test).



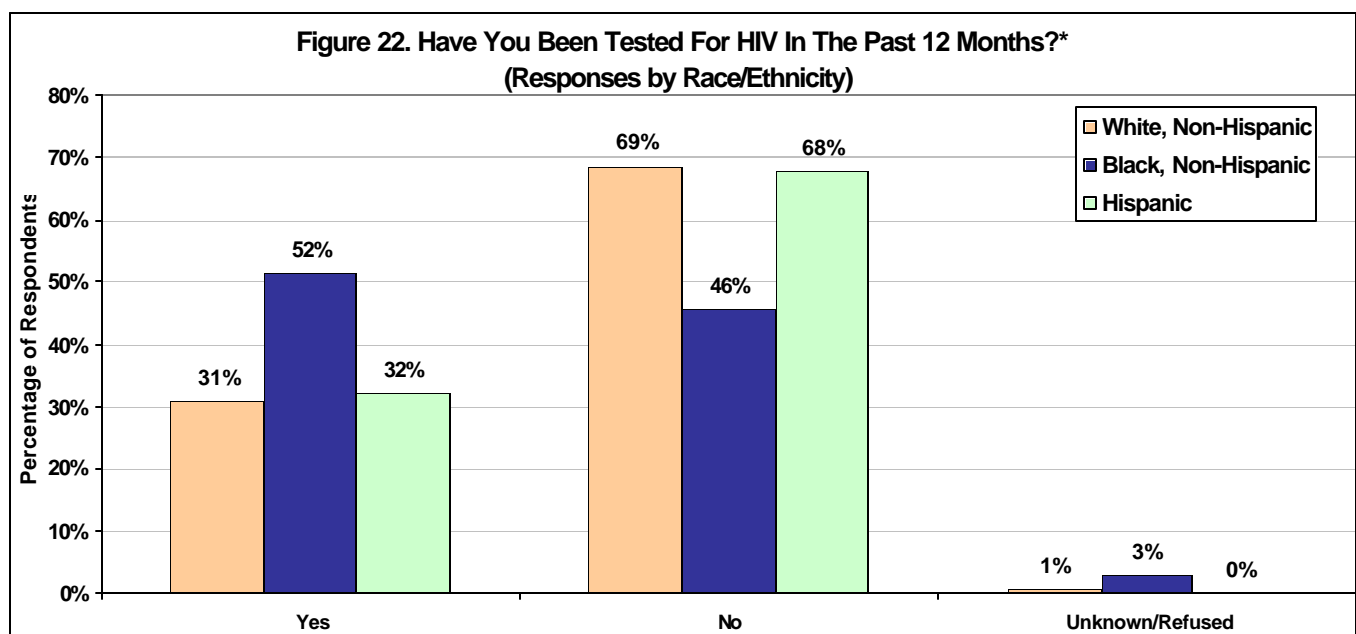
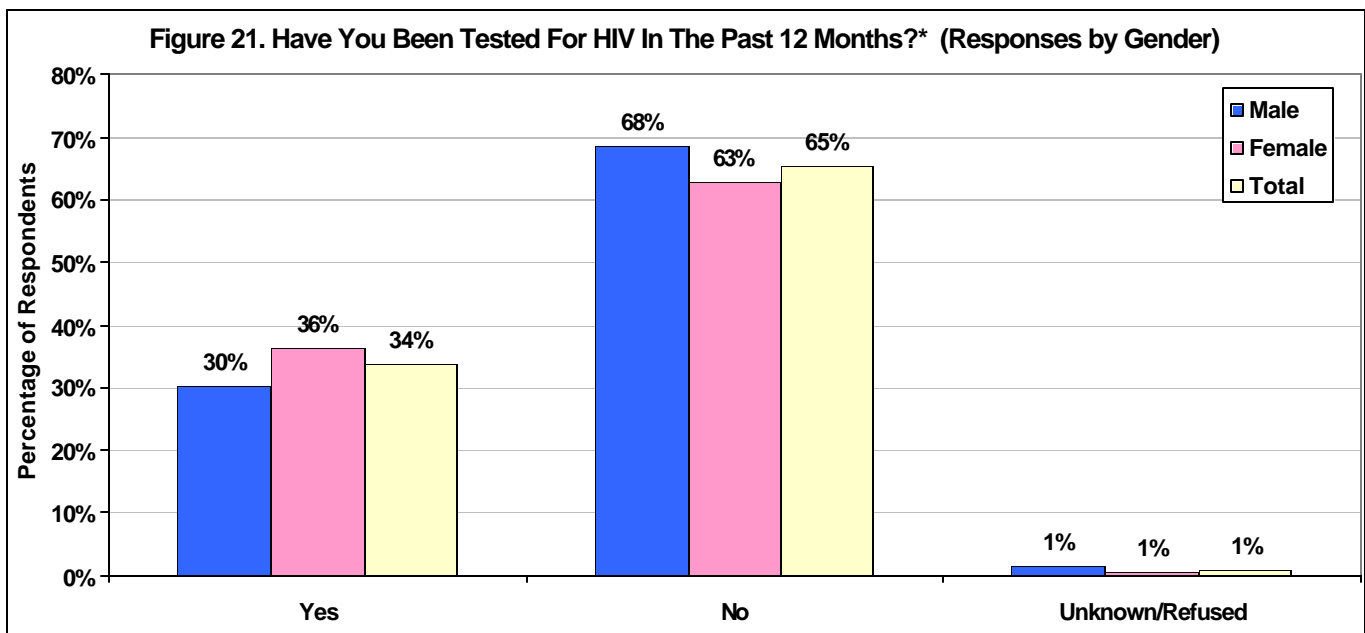
1999 Missouri Behavioral Risk Factor Surveillance System: Missouri



1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

Of the 2,328 respondents who did not report donating blood since March 1985, and who were asked whether they had ever been tested for HIV, 952 indicated they had been tested. These 952 individuals were then asked **"Have you been tested for HIV in the past 12 months?"** The responses are shown in Figures 21-25. The height of each individual bar corresponds to the percentage of respondents in that particular category who gave the indicated response to the question (see the box inside Figure 1 on page 52 for additional explanation).

Only about one-third (34%) of respondents who had, for some reason other than blood donation, been tested for HIV indicated they had been tested in the past 12 months. African Americans were more likely than Hispanics or white non-Hispanics (52% vs. 32% and 31%, respectively) to have been tested during this period. Also, individuals in the youngest age group (18-24 years), those without a high school diploma or GED, and those with the lowest income level (<\$15,000) were more likely to have been tested; of respondents in these categories, 57%, 46%, and 43%, respectively, reported having an HIV test in the past 12 months.



1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

Figure 23. Have You Been Tested For HIV In The Past 12 Months?*
(Responses by Age Group)

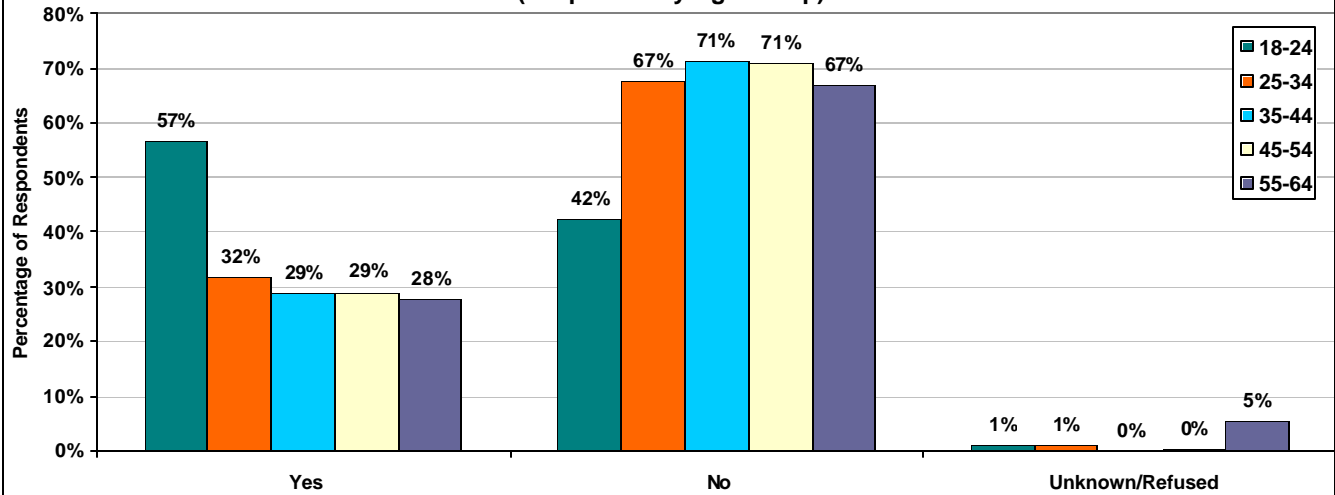


Figure 24. Have You Been Tested For HIV In The Past 12 Months?*
(Responses by Education Level)

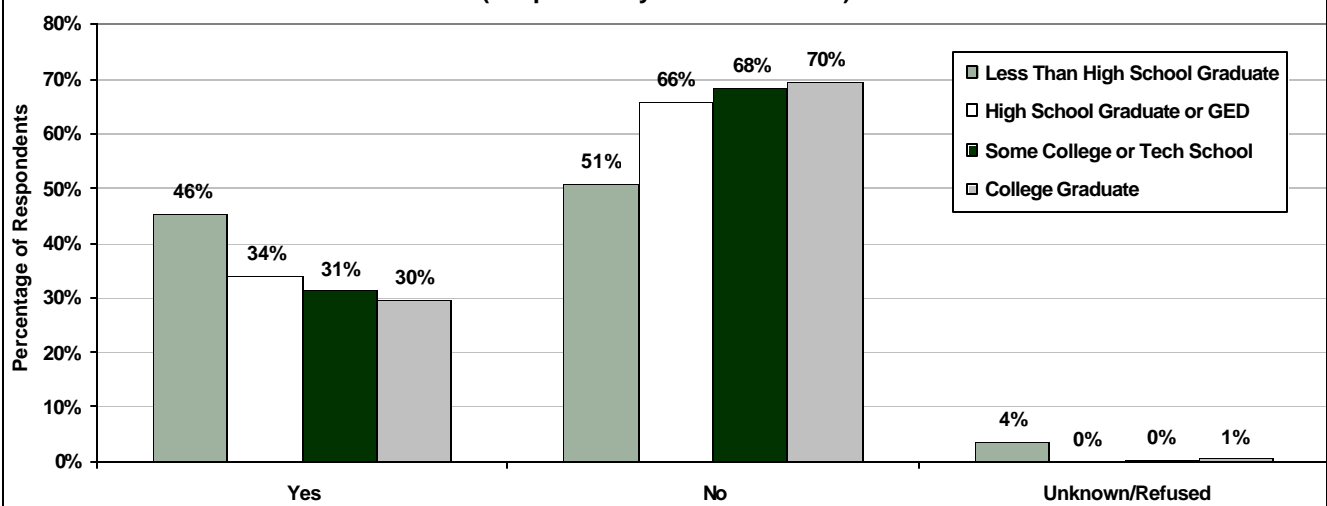
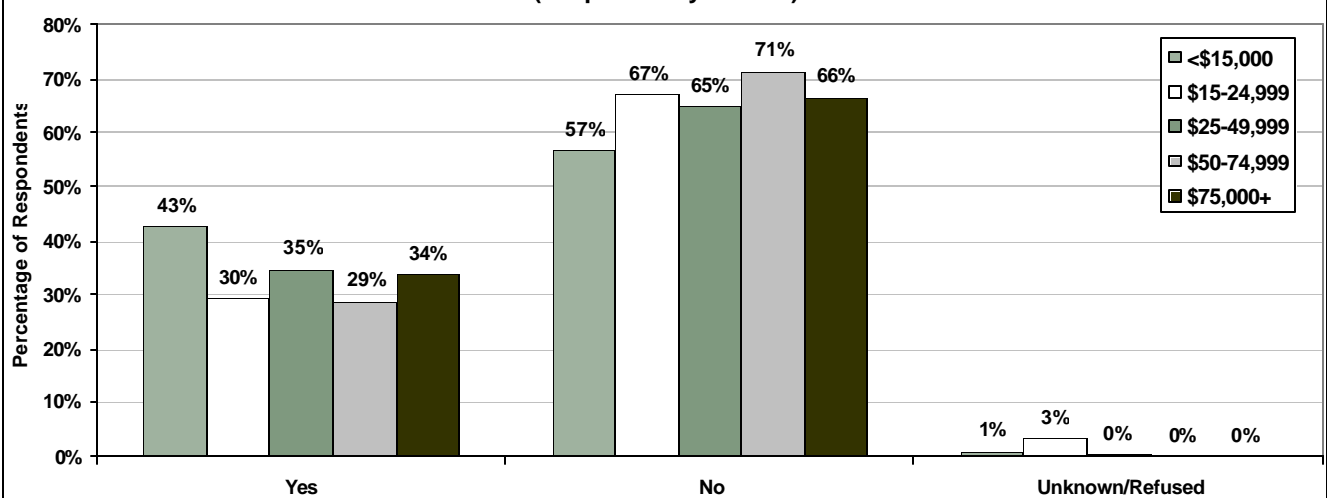


Figure 25. Have You Been Tested For HIV In The Past 12 Months?*
(Responses by Income)



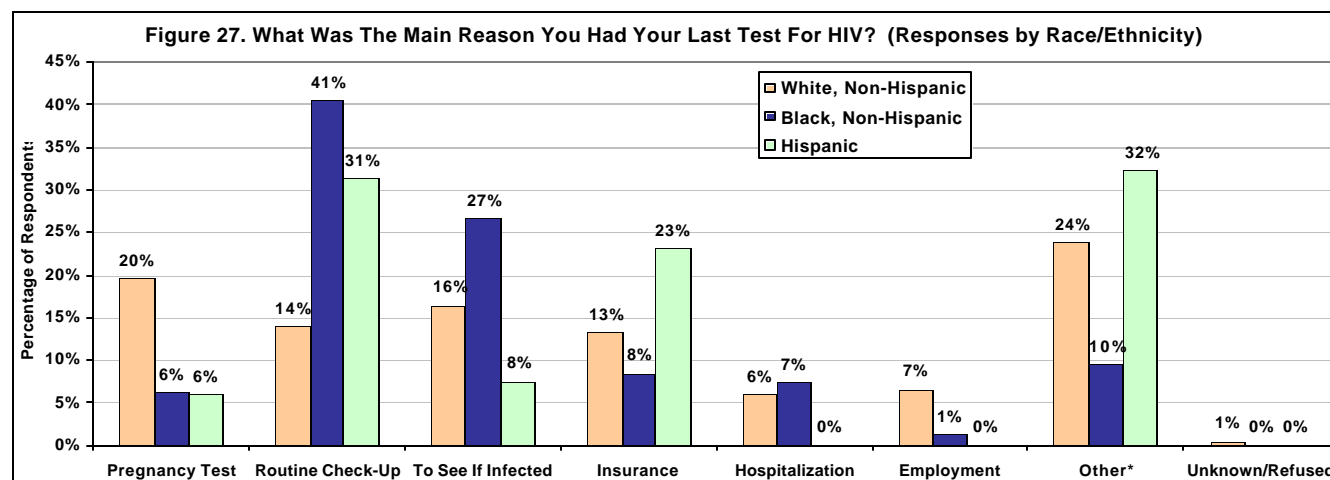
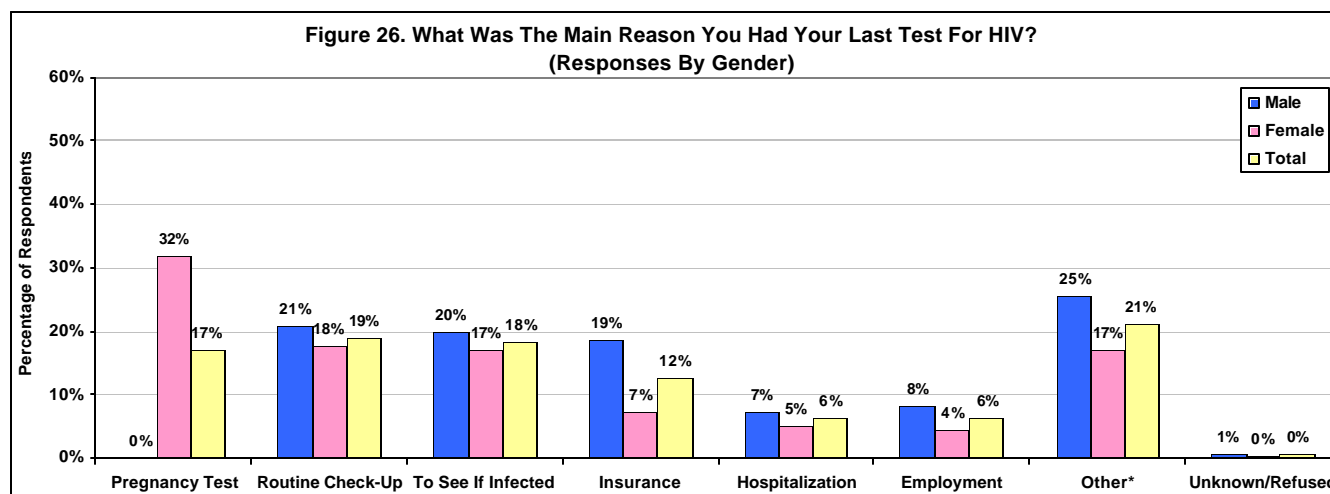
1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

Of the 3,304 BRFSS participants 18-64 years of age, 463 reported having an HIV test in the past 12 months that was not part of a blood donation process. (These individuals included both persons with and without a history of donating blood, but all had been tested for HIV in the past twelve months for reasons other than donating blood.) These 463 individuals were asked **“What was the main reason you had your last test for HIV?”** The responses are shown in Figures 26-30. The height of each individual bar corresponds to the percentage of respondents in that particular category who gave the indicated response to the question (see the box inside Figure 1 on page 52 for additional explanation).

The most common reasons for participants' last HIV test were “routine check-up” (19%) and “to see if infected” (18%). Almost one-third (32%) of tests in females were conducted because of pregnancy. (Note that it is currently recommended that all pregnant women be encouraged to undergo testing for HIV.)

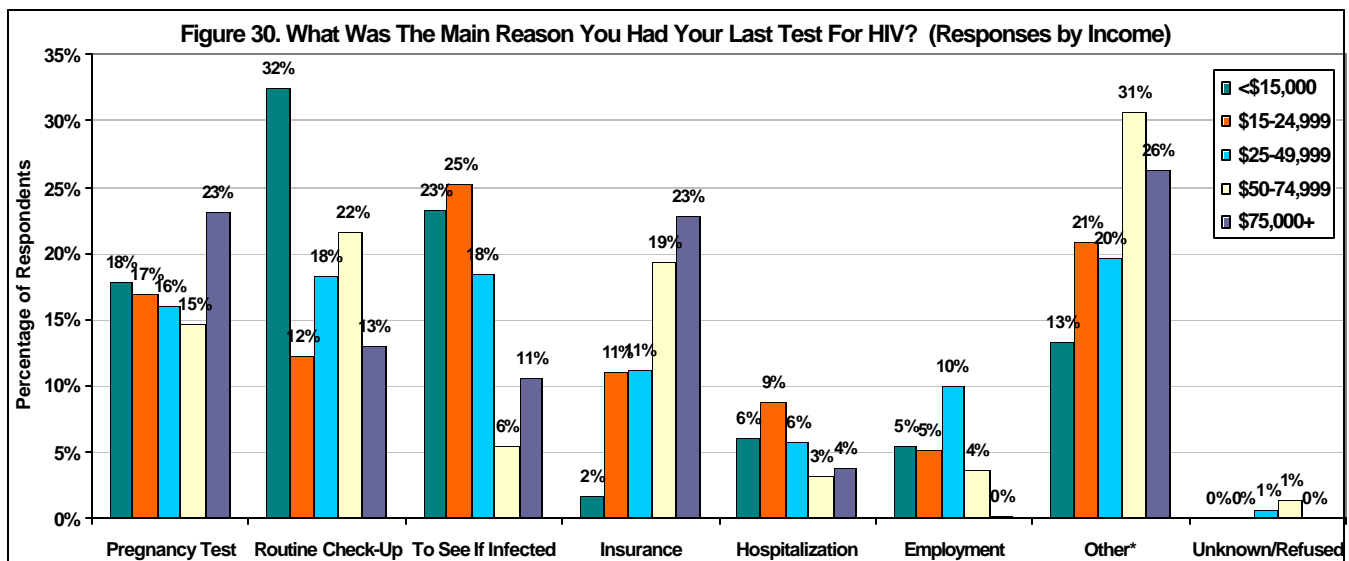
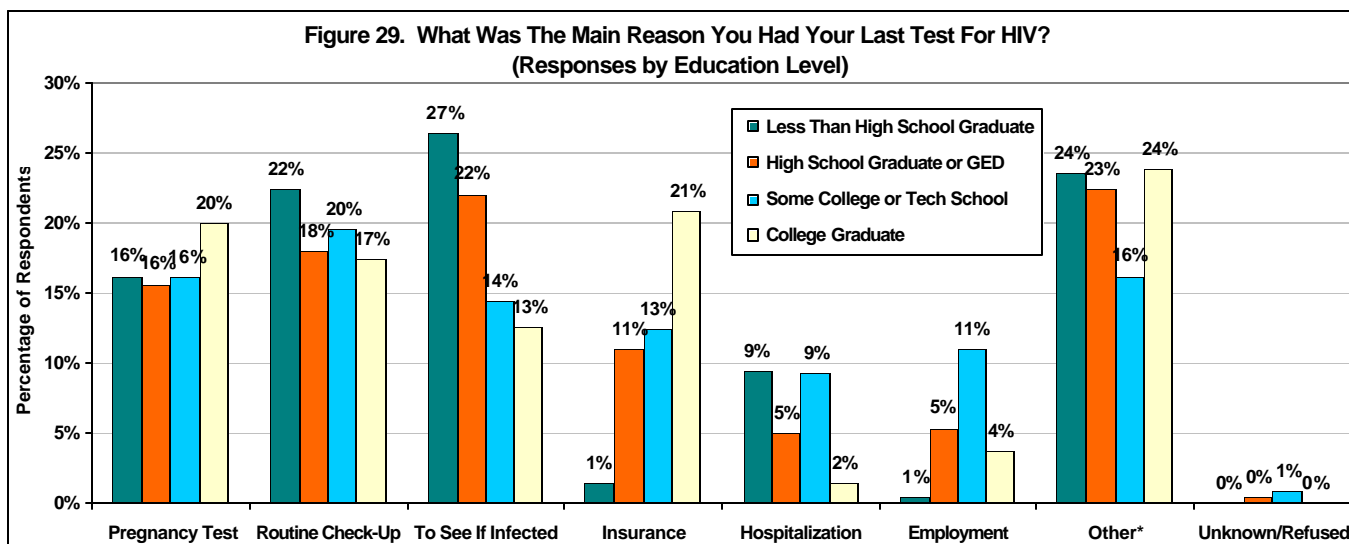
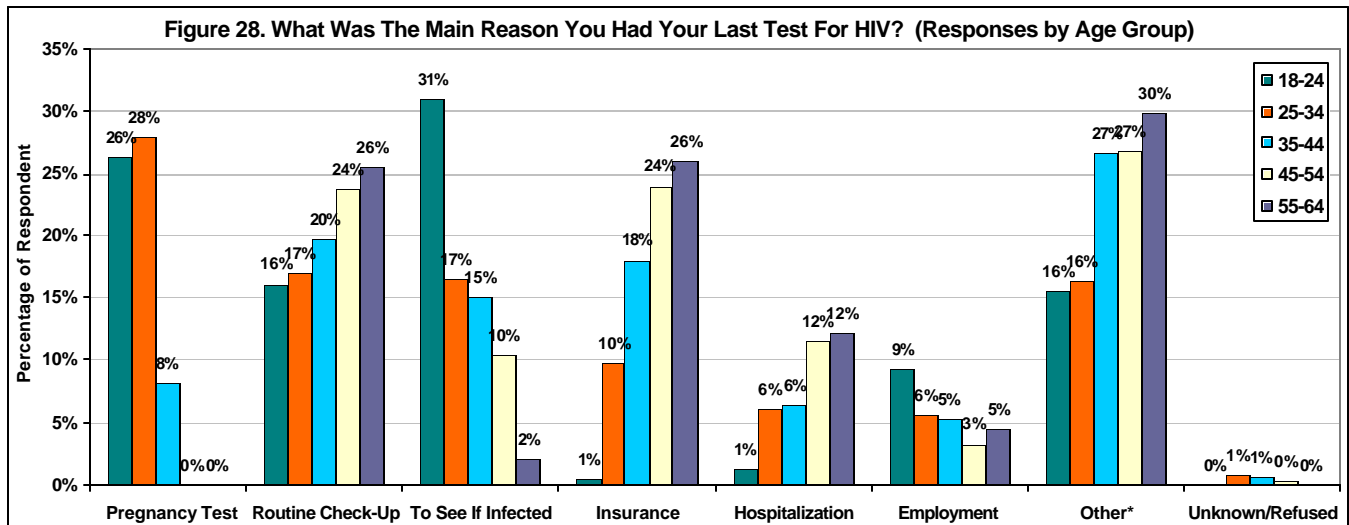
The responses indicated that, in general, the older the respondent, the more likely that their last HIV test was part of a routine check-up or for insurance purposes. For persons in the oldest age group (55-64), 26% of tests were part of a routine check-up, and an additional 26% were done for purposes of insurance. In contrast, the younger the respondent, the more likely, in general, that their last test was “to see if infected.” Thirty-one percent of tests in the youngest age group (18-24 years) were for this purpose.

The responses also indicated that, in general, the more formal education the respondent had, the more likely that their last HIV test was for insurance purposes; for persons in the highest education level category (college graduate), 21% of tests were done for purposes of insurance. Conversely, the less formal education the respondent had, the more likely, in general, that their last test was “to see if infected.” Twenty-seven percent of tests in those without a high school degree or GED were for this purpose.



*Includes military induction/service, referred by doctor, occupational exposure, illness, at risk for HIV.

1999 Missouri Behavioral Risk Factor Surveillance System: Missouri



*Includes military induction/service, referred by doctor, occupational exposure, illness, at risk for HIV.

1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

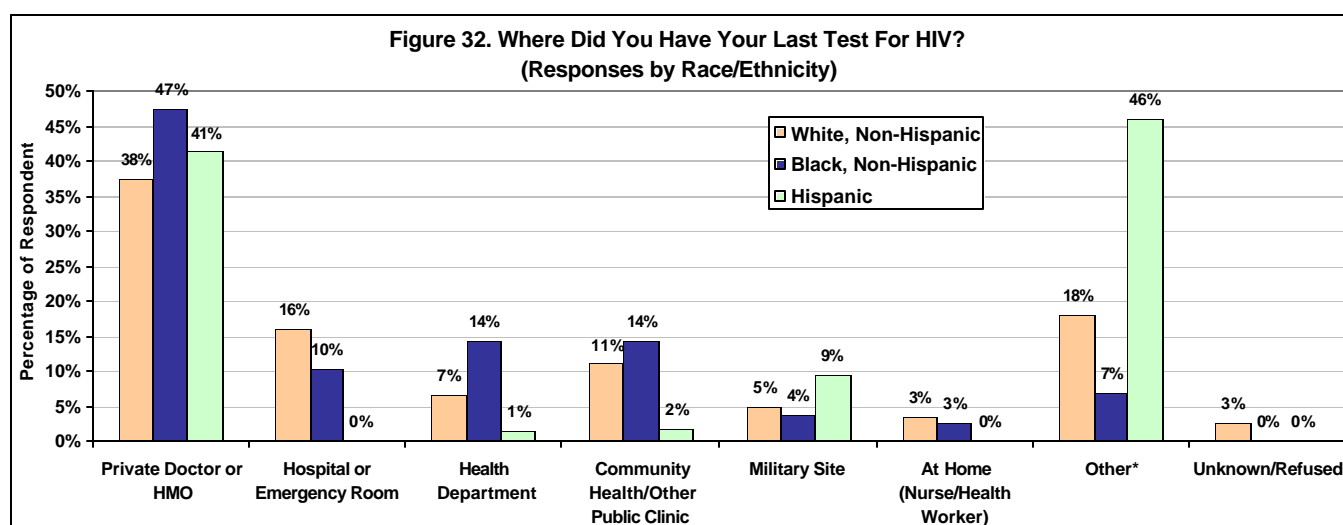
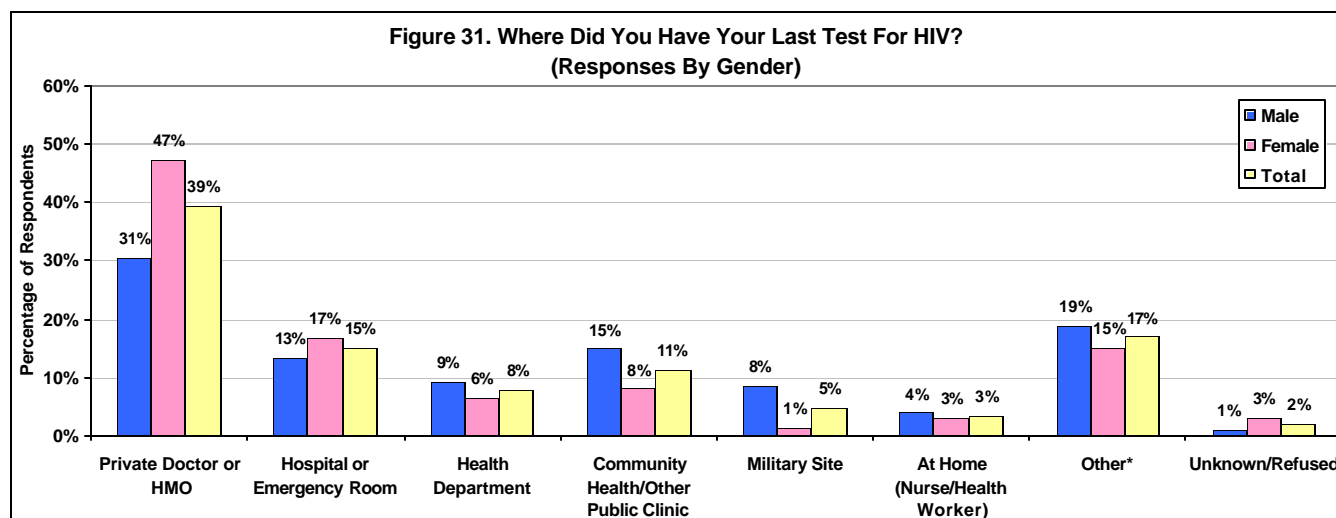
The 463 respondents who reported having an HIV test in the past 12 months that was not part of a blood donation process were asked **"Where did you have your last test for HIV?"** The responses are shown in Figures 31-35. The height of each individual bar corresponds to the percentage of respondents in that particular category who gave the indicated response to the question (see the box inside Figure 1 on page 52 for additional explanation).

The largest proportion (39%) of respondents had their last HIV test performed by a private physician or health maintenance organization (HMO). Fifteen percent were tested in a hospital or emergency room, and 11% were tested in a community health clinic or other public clinic.

Almost half (47%) of female respondents were last tested by a private physician or HMO.

Likewise, among African Americans, almost half (47%) of participants had their last HIV test performed by a private doctor or HMO; 14% were tested at a community health clinic or other public clinic, and 14% were tested at a public health department.

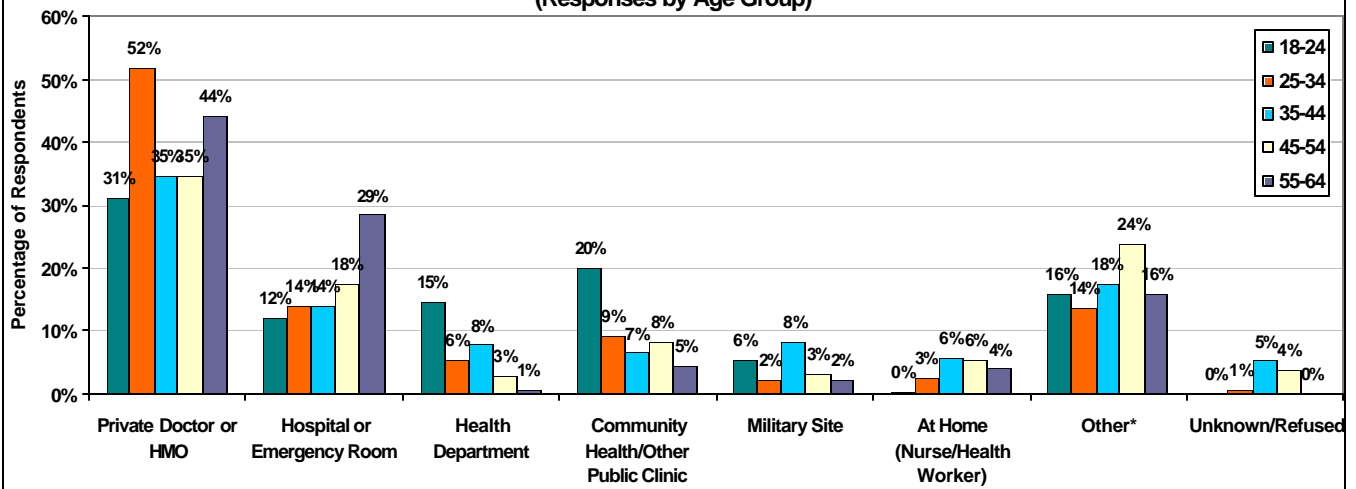
Older respondents were more likely, in general, to report having their last HIV test from a private physician or HMO, or at a hospital or emergency room. Forty-four percent of individuals in the oldest age group (55-64) reported being tested by a private doctor or HMO, and 29% indicated they had been tested in a hospital or emergency room.



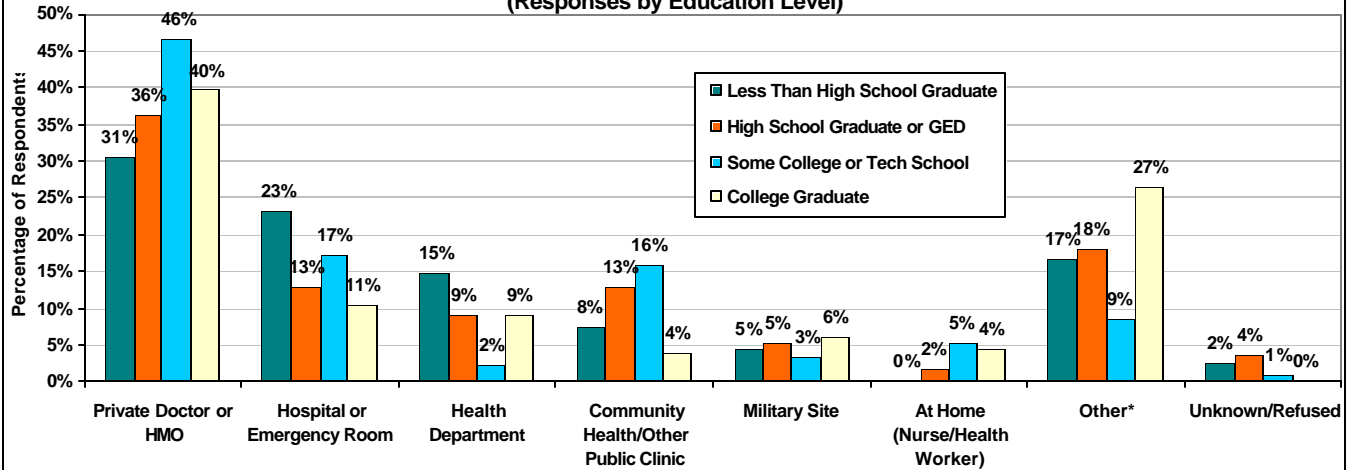
*Includes AIDS clinic or test site, family planning clinic, prenatal clinic or Ob/Gyn office, STD clinic, company or industry clinic, insurance company clinic, drug treatment clinic, at-home self testing kit, and jail or prison.

1999 Missouri Behavioral Risk Factor Surveillance System: Missouri

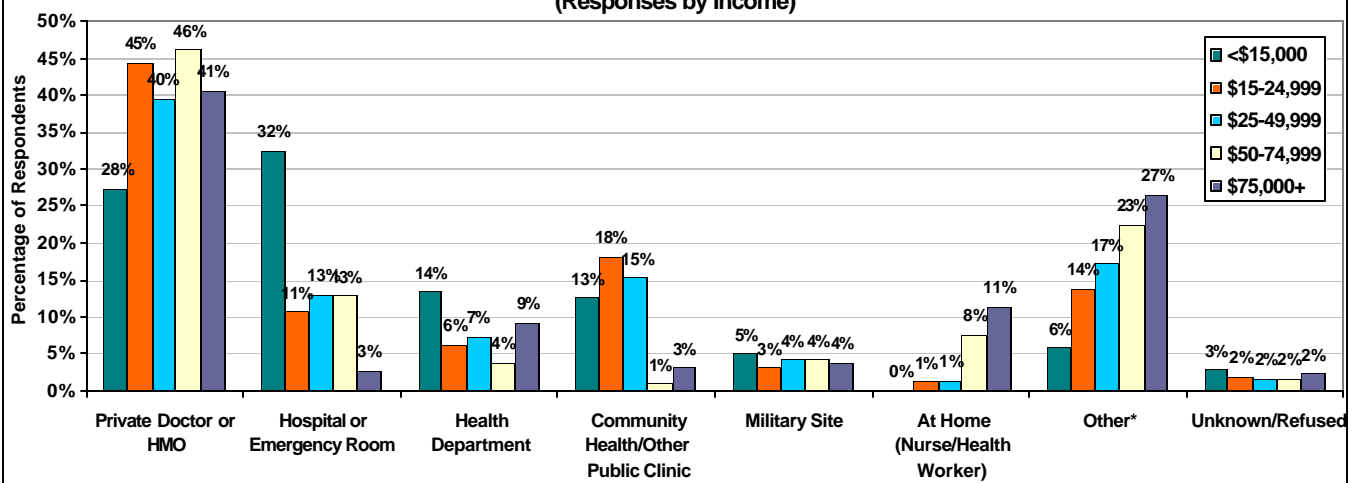
**Figure 33. Where Did You Have Your Last Test For HIV?
(Responses by Age Group)**



**Figure 34. Where Did You Have Your Last Test For HIV?
(Responses by Education Level)**



**Figure 35. Where Did You Have Your Last Test For HIV?
(Responses by Income)**



*Includes AIDS clinic or test site, family planning clinic, prenatal clinic or Ob/Gyn office, STD clinic, company or industry clinic, insurance company clinic, drug treatment clinic, at-home self testing kit, and jail or prison.

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1999 Missouri Youth Risk Behavior Survey

Missouri Department of Elementary and Secondary Education

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February 2000

A full copy of this survey can be found at <http://www.dese.state.mo.us/divinstr/curriculum/hiveducation/survey1999.pdf>.

Support for this publication was provided through Cooperative Agreement U87/CCU709009-08 with the Division of Adolescent and School Health, Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention.

Figure 24. Percentage of high school students who ever had sexual intercourse, by grade—Missouri and United States, 1995, 1997, 1999^{5,6,7}

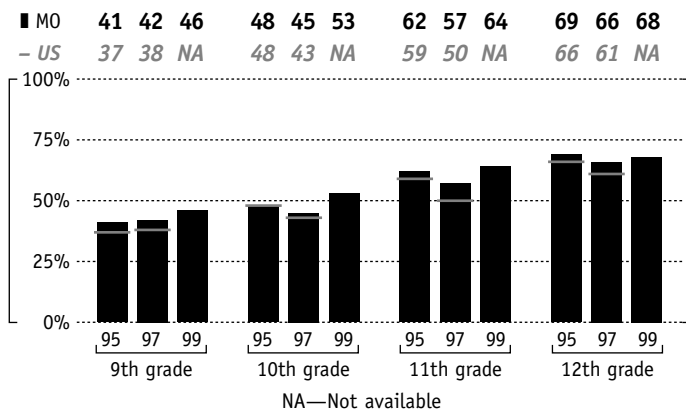


Figure 26. Percentage of high school students who had sexual intercourse with one or more people during the past three months, by grade—Missouri and United States, 1995, 1997, 1999^{5,6,7}

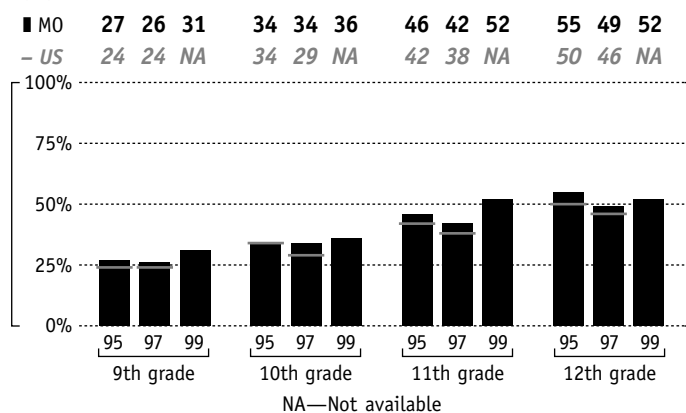


Figure 23. Percentage of high school students who ever had sexual intercourse, by gender—Missouri and United States, 1995, 1997, 1999^{5,6,7}

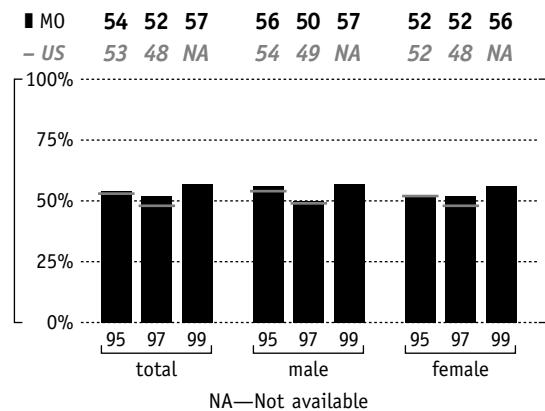


Figure 25. Percentage of high school students who had sexual intercourse with one or more people during the past three months, by gender—Missouri and United States, 1995, 1997, 1999^{5,6,7}

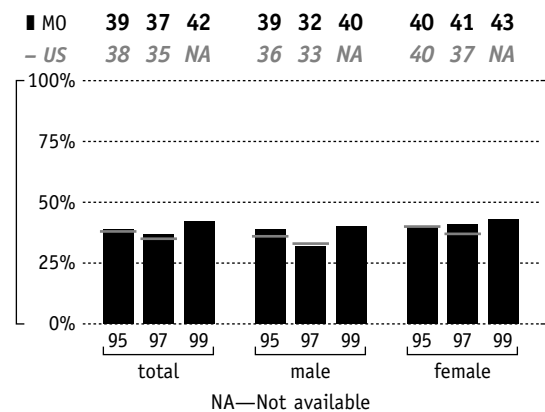
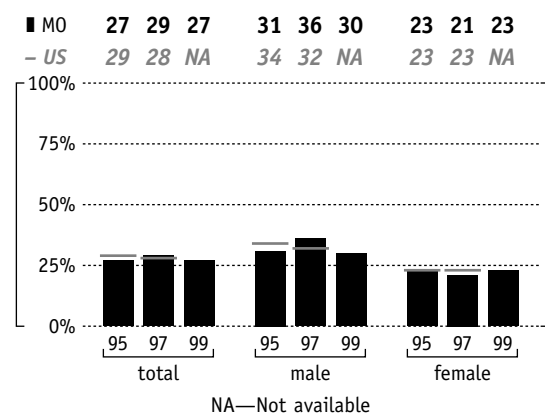


Figure 27. Percentage of high school students who had sexual intercourse, but not during the three months preceding the survey, by gender—Missouri and United States, 1995, 1997, 1999^{5,6,7}



Sexual behavior

The percentage of Missouri high school students who had ever had sex and the percentage who were currently sexually active both rose, after decreasing somewhat in 1997 (Figures 23,24,25,26). The percentage of students who had had intercourse in the past but were not currently sexually active was the same as in 1995 (Figure 27). Ten percent of students reported intercourse before age 13, indicating the need to focus prevention efforts at younger ages (Figure 28). Twenty percent of Missouri high school students reported more than four lifetime partners, a finding of great concern given the incidence of sexually transmitted diseases among teens.

Figure 28. Percentage of high school students who had sexual intercourse for the first time before age 13, by gender—Missouri and United States, 1995, 1997, 1999^{5,6,7}

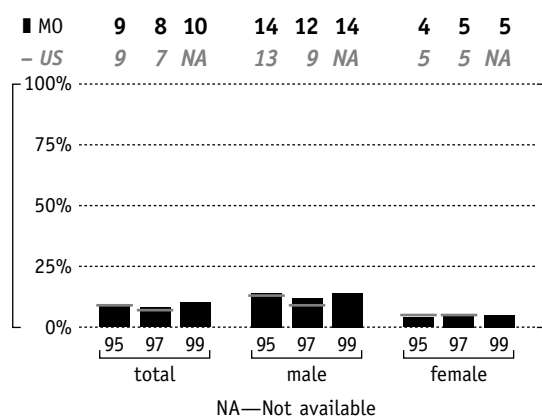


Figure 29. Percentage of high school students[†] who used a condom during last sexual intercourse—Missouri and United States, 1995, 1997, 1999^{5,6,7}

[†]of those who had sexual intercourse during the three months preceding the survey

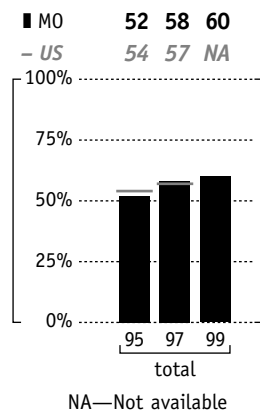
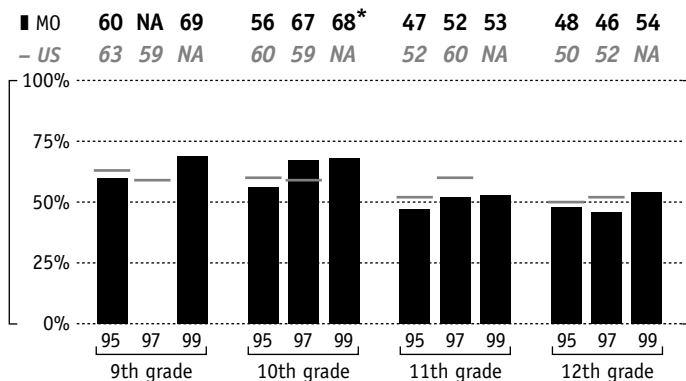


Figure 30. Percentage of high school students[†] who used a condom during last sexual intercourse, by grade—Missouri and United States, 1995, 1997, 1999^{5,6,7}

[†]of those who had sexual intercourse during the three months preceding the survey

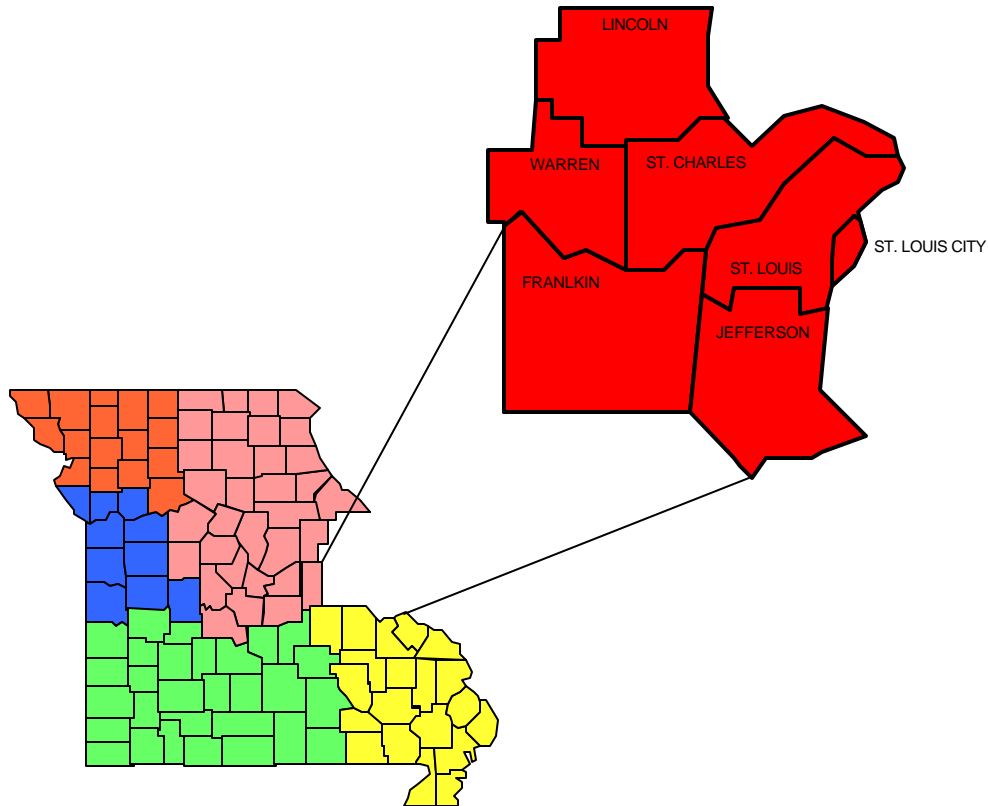


The percentage of sexually active students who used condoms increased from 1995 to 1999, but continued to be lower among twelfth grade students than ninth grade students, presumably because older students have access to other contraceptives or do not appreciate the value of condoms in preventing sexually transmitted diseases (Figures 29,30). When used consistently and correctly, latex condoms are highly effective at reducing the risk of HIV infection and other sexually transmitted diseases.²⁰

Early and unprotected sexual intercourse may result in unintended pregnancy and sexually transmitted disease. Pregnancies that occur during adolescence place both mothers and infants at risk for lifelong social and economic disadvantages.²¹ Two-thirds of teen mothers do not graduate from high school, and the children of teen mothers are more likely to have lower birth weights and more likely to perform poorly in school.^{1,22}

Despite declines in teen pregnancy, abortion, and birth rates in Missouri,²³ serious problems remain. In Missouri during 1998, there were 4,619 pregnancies to females under the age of 18.²³ There were 3,479 births to females ages 15 – 17, and 137 births to females under the age of 15.²³ More reported cases of chlamydia occur among adolescent females than any other group. In 1998, 3,497 cases were reported among Missouri females ages 15 – 19, accounting for 28 percent of total cases.²⁴ Through 1998, 40 percent of cumulative reported HIV cases in Missouri occurred among 20- to 29-year-olds, indicating that many infections occur among teenagers.²⁵

St. Louis HIV Region



1999 Population Estimates for the St. Louis City HIV Region

County	White		African American		American Indian		Asian/Pacific Is		Hispanic		Total	
Franklin County	90,829	97.5%	1,086	1.2%	147	0.2%	332	0.4%	734	0.8%	93,128	100.0%
Jefferson County	193,095	97.5%	1,707	0.9%	441	0.2%	923	0.5%	1,950	1.0%	198,116	100.0%
Lincoln County	36,130	95.8%	959	2.5%	111	0.3%	111	0.3%	422	1.1%	37,733	100.0%
St. Charles County	264,895	94.5%	7,897	2.8%	584	0.2%	2,679	1.0%	4,393	1.6%	280,448	100.0%
St. Louis City	147,159	44.1%	176,262	52.8%	634	0.2%	4,035	1.2%	5,870	1.8%	333,960	100.0%
St. Louis County	796,798	80.0%	164,782	16.5%	1,215	0.1%	19,610	2.0%	13,776	1.4%	996,181	100.0%
Warren County	24,213	95.2%	819	3.2%	49	0.2%	60	0.2%	294	1.2%	25,435	100.0%
Region Totals	1,553,119	79.0%	353,512	18.0%	3,181	0.2%	27,750	1.4%	27,439	1.4%	1,965,001	100.0%

Source: U.S. Census Bureau

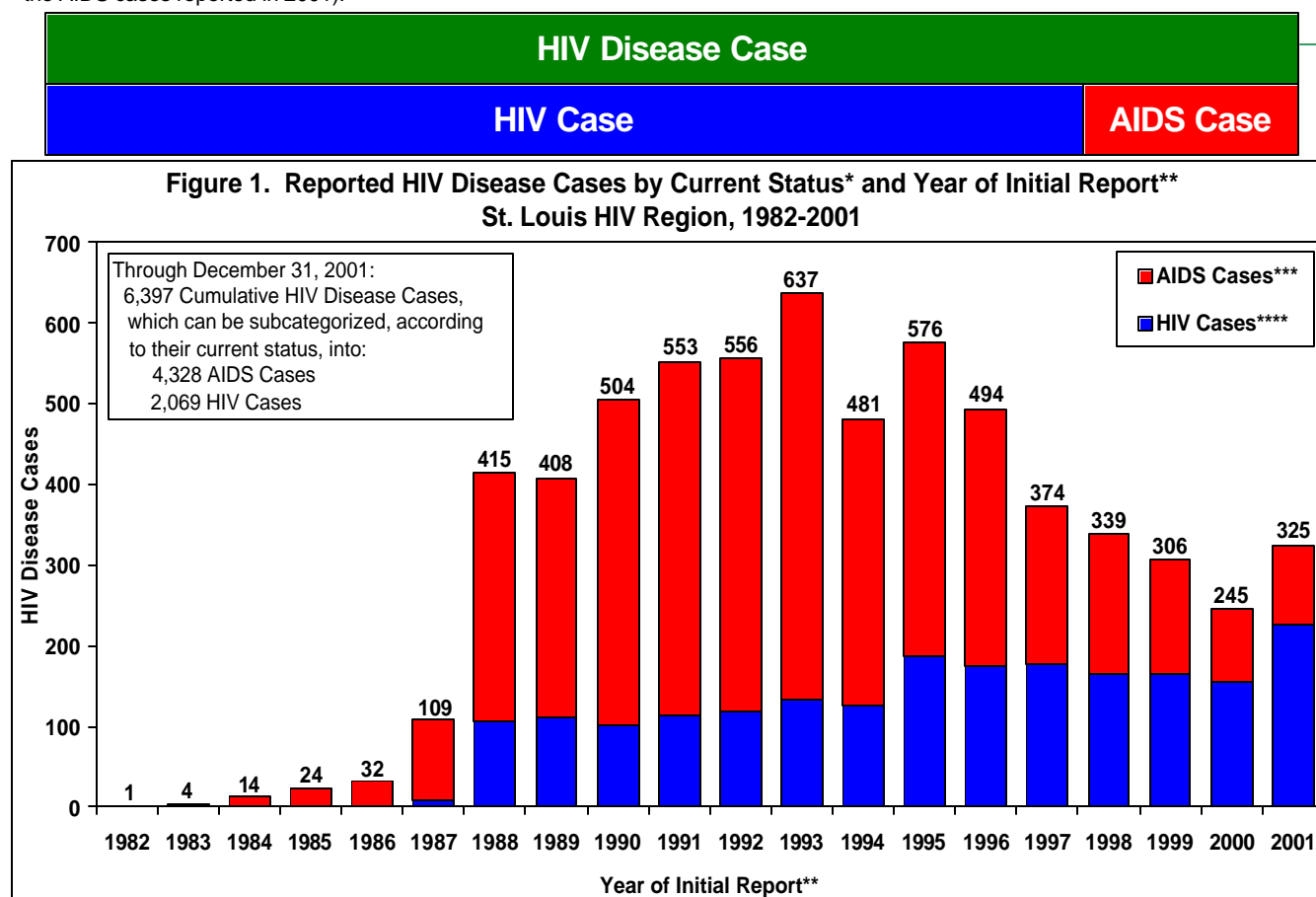
HIV Disease Epi Profile Summary: St. Louis HIV Region

Magnitude and Impact of the Problem

- From 1982 through 2001, a total of 6,397 HIV Disease cases have been reported in residents of the St. Louis HIV Region. In 2001, 325 new HIV Disease cases were reported for the first time to public health officials. Figure 1 shows reported HIV Disease cases by current status (HIV case vs. AIDS case) and year of initial report (i.e., the year in which the first report of the person, whether as an HIV case or an AIDS case, was received). (See also the section entitled “**Trends**” on page 106.)
- Of these 6,397 HIV Disease cases, 4,328 (67.7%) have met the case definition for AIDS and are thus categorized as AIDS cases; 2,302 (53.2%) of the 4,328 reported AIDS cases are known to have died, and 2,026 (46.8%) are living. In 2001, 217 AIDS cases were reported. Figure 2 (page 102) shows persons (living and deceased) diagnosed with AIDS by year of report (see also the section entitled “**Trends**” on page 106).
- The Centers for Disease Control and Prevention (CDC) reports that, in 2000, 252 AIDS cases were reported from the St. Louis Metropolitan Area[#]; the corresponding rate was 9.7 cases per 100,000 population. This rate is approximately half the average rate for all U.S. metropolitan areas with 500,000 or more population (18.9).
- Of the 6,397 reported HIV Disease cases, 2,069 (32.3%) have not met the case definition for AIDS, and are thus categorized as HIV cases; 226 HIV cases* were reported in 2001.

[#]The St. Louis Metropolitan Area consists of six Missouri counties (Franklin, Jefferson, Lincoln, St. Charles, St. Louis, and Warren), St. Louis City, and five Illinois counties (Clinton, Jersey, Madison, Monroe, and St. Clair).

* When reference is made to HIV cases reported in 2001, this means HIV cases reported during that year which remained HIV cases at the end of the year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included (instead, they are included among the AIDS cases reported in 2001).



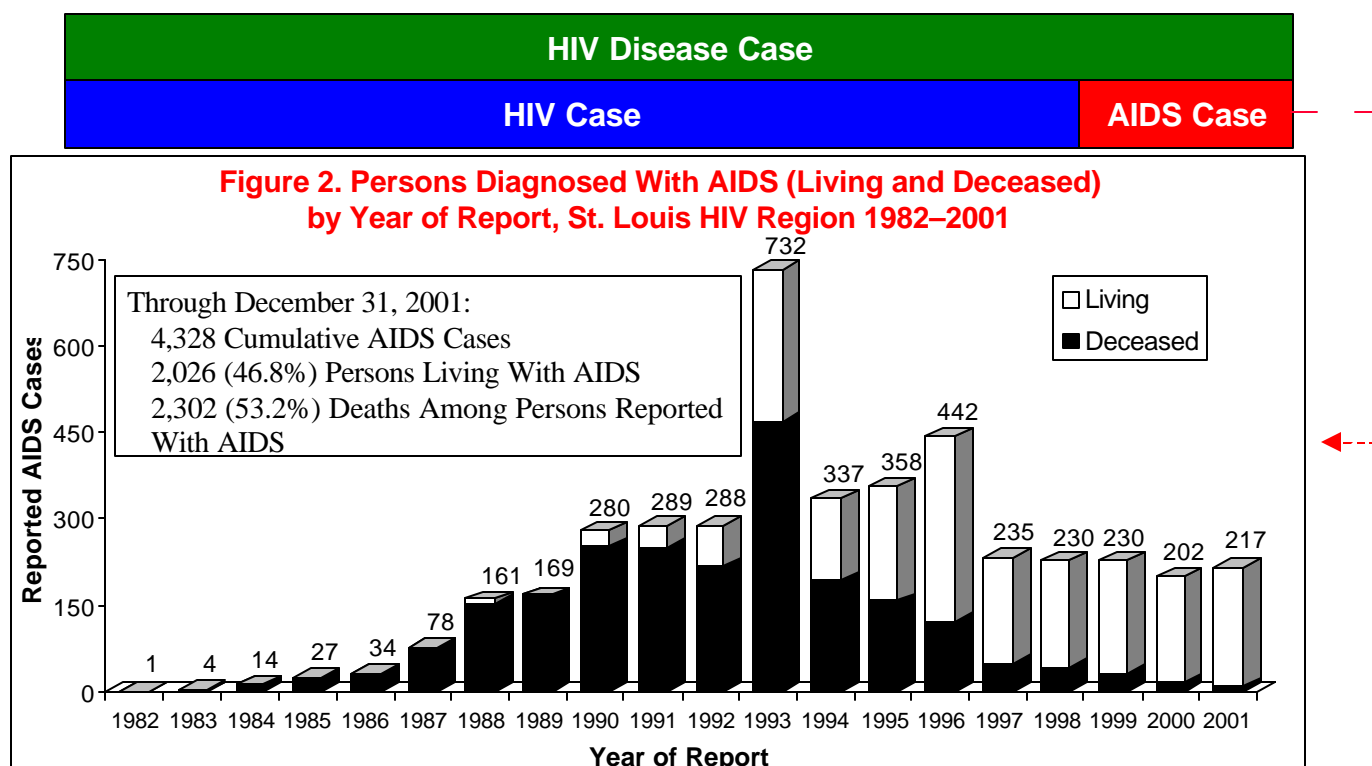
*HIV Cases vs. AIDS Cases

**Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)

***These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition; or 2) initially reported as an AIDS case.

****These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

HIV Disease Epi Profile Summary: St. Louis HIV Region



Who

- Table 1 describes HIV cases, AIDS cases, and HIV Disease cases by gender, race/ethnicity, age at diagnosis.
- Males comprise 82.0% of the 2,069 cumulative reported HIV cases and 89.5% of the 4,328 cumulative reported AIDS cases.
- Blacks* are disproportionately represented in the HIV/AIDS epidemic. Although blacks make up only about 18% of the St. Louis HIV Region's population, they accounted for 55.3% of HIV cases and 62.2% of AIDS cases reported in 2001. The rate for HIV cases reported in 2001 in blacks (35.4) was 6.0 times the rate in whites* (5.9).
- The over-representation of blacks is especially seen in reported HIV and AIDS cases in females. Of the 59 female HIV cases reported in 2001, 44 (74.6%) were in black females. Of the 43 female AIDS cases reported in 2001, 33 (76.7%) were in black females.
- For Hispanics, the numbers of reported HIV and AIDS cases have been relatively small (19 cumulative HIV cases with 3 cases reported in 2001; 47 cumulative AIDS cases with no cases reported in 2001).
- The numbers of total reported HIV and AIDS cases in Asians and in American Indians have been very small (3 HIV cases and 11 AIDS cases in Asians; 2 HIV cases and 3 AIDS cases in American Indians). No HIV cases were reported in Asians or American Indians in 2001. Two AIDS cases were reported in Asians in 2001.
- Of the 226 HIV cases reported in 2001, 37.2% were diagnosed in 30-39 year olds, 27.0% in 20-29 year olds, 23.9% in 40-49 year olds, 7.5% in persons 50 years of age and older, and 3.5% in 13-19 year olds. These data indicate that many infections are occurring in persons in their twenties, and that infections are certainly occurring in teenagers.
- Of the 224 adult/adolescent HIV cases reported in 2001: 84 (37.5%) were in men who have sex with men (MSM); 9 (4.0%) in injecting drug users (IDUs); 55 (24.6%) in heterosexual contacts; and 76 (33.9%) are still being investigated and have not yet been placed in a specific exposure category.
- Of the 215 adult/adolescent AIDS cases reported in 2001: 118 (54.9%) were in MSM; 7 (3.3%) in MSM/IDUs; 18 (8.4%) in IDUs; 45 (20.9%) in heterosexual contacts; and 24 (11.2%) are still being investigated and have not yet been placed in a specific exposure category.
- Table 2 shows HIV and AIDS cases by adjusted exposure category. In this table, those cases currently classified as "Other/Unknown Adult", many of which are still under investigation, have been assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, heterosexual contact) in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of these cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation.
- A total of 13 perinatal HIV cases and 26 perinatal AIDS cases have been reported; in 2001, 2 perinatal HIV cases and 1 perinatal AIDS case were reported. (Perinatal cases are the result of HIV transmission from an infected mother to her infant before or at the time of birth, or through breastfeeding.)
- Information on HIV-exposed infants is found in the "**Missouri**" section on page 21.

HIV Disease Epi Profile Summary: St. Louis HIV Region

HIV Disease Case

HIV Case

AIDS Case

Table 1. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Age at Diagnosis, St. Louis HIV Region, 1982–2001

	HIV Cases				AIDS Cases				HIV Disease	
	Reported 2001*	%	Cumulative	%	Reported 2001	%	Cumulative	%	Cumulative	%
Gender										
Male	167	(73.9%)	1,696	(82.0%)	174	(80.2%)	3,873	(89.5%)	5,569	(87.1%)
Female	59	(26.1%)	373	(18.0%)	43	(19.8%)	455	(10.5%)	828	(12.9%)
Race/Ethnicity										
White	92	(40.7%)	940	(45.4%)	80	(36.9%)	2,396	(55.4%)	3,336	(52.1%)
Black	125	(55.3%)	1,093	(52.8%)	135	(62.2%)	1,871	(43.2%)	2,964	(46.3%)
Hispanic	3	(1.3%)	19	(0.9%)	0	(0.0%)	47	(1.1%)	66	(1.0%)
Asian/Pacific Islander	0	(0.0%)	3	(0.1%)	2	(0.9%)	11	(0.3%)	14	(0.2%)
American Indian	0	(0.0%)	2	(0.1%)	0	(0.0%)	3	(0.1%)	5	(0.1%)
Unknown	6	(2.7%)	12	(0.6%)	0	(0.0%)	0	(0.0%)	12	(0.2%)
Race/Ethnicity and Gender										
White Male	79	(35.0%)	855	(41.3%)	70	(32.3%)	2,268	(52.4%)	3,123	(48.8%)
Black Male	81	(35.8%)	811	(39.2%)	102	(47.0%)	1,551	(35.8%)	2,362	(36.9%)
Hispanic Male	3	(1.3%)	17	(0.8%)	0	(0.0%)	42	(1.0%)	59	(0.9%)
Asian/Pacific Islander Male	0	(0.0%)	2	(0.1%)	2	(0.9%)	9	(0.2%)	11	(0.2%)
American Indian Male	0	(0.0%)	2	(0.1%)	0	(0.0%)	3	(0.1%)	5	(0.1%)
Unknown Male	4	(1.8%)	9	(0.4%)	0	(0.0%)	0	(0.0%)	9	(0.1%)
White Female	13	(5.8%)	85	(4.1%)	10	(4.6%)	128	(3.0%)	213	(3.3%)
Black Female	44	(19.5%)	282	(13.6%)	33	(15.2%)	320	(7.4%)	602	(9.4%)
Hispanic Female	0	(0.0%)	2	(0.1%)	0	(0.0%)	5	(0.1%)	7	(0.1%)
Asian/Pacific Islander Female	0	(0.0%)	1	(0.1%)	0	(0.0%)	2	(0.1%)	3	(0.1%)
American Indian Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Unknown Female	2	(0.9%)	3	(0.1%)	0	(0.0%)	0	(0.0%)	3	(0.1%)
Age at Diagnosis[‡]										
<13	2	(0.9%)	16	(0.8%)	1	(0.5%)	32	(0.7%)		
13-19	8	(3.5%)	111	(5.4%)	4	(1.8%)	44	(1.0%)		
20-29	61	(27.0%)	720	(34.8%)	36	(16.6%)	915	(21.1%)		
30-39	84	(37.2%)	797	(38.5%)	87	(40.1%)	1,978	(45.7%)		
40-49	54	(23.9%)	317	(15.3%)	67	(30.9%)	958	(22.1%)		
50+	17	(7.5%)	108	(5.2%)	22	(10.1%)	401	(9.3%)		
St. Louis HIV Region Total	226 (100.0%)		2,069 (100.0%)		217 (100.0%)		4,328 (100.0%)		6,397 (100.0%)	

*HIV Cases reported during 2001 which remained HIV cases at the end of that year.

†For HIV Cases, Age at Diagnosis is the age at which the individual was first diagnosed with HIV infection.

‡For AIDS Cases, Age at Diagnosis is the age at which the individual was first diagnosed with AIDS.

Table 2. HIV and AIDS Cases by Adjusted Exposure Category, St. Louis HIV Region
Reported 2001 and Cumulative Through December 2001**

Exposure Category	HIV Cases				AIDS Cases			
	Reported 2001**	%	Cumulative	%	Reported 2001	%	Cumulative	%
Adult/Adolescent								
Men Who Have Sex With Men	127	(56.7%)	1,389	(67.7%)	133	(61.9%)	3,206	(74.7%)
Men Who Have Sex With Men & Inject Drugs	2	(0.9%)	75	(3.7%)	9	(4.2%)	265	(6.2%)
Injecting Drug Use	12	(5.4%)	136	(6.6%)	18	(8.4%)	296	(6.9%)
Heterosexual Contact	83	(37.1%)	436	(21.2%)	51	(23.7%)	430	(10.0%)
Hemophilia/Coagulation Disorder	0	(0.0%)	12	(0.6%)	1	(0.5%)	58	(1.4%)
Blood Transfusion or Tissue Recipient	0	(0.0%)	5	(0.2%)	3	(1.4%)	38	(0.9%)
Risk Not Specified	--	--	--	--	--	--	--	--
Adult/Adolescent Subtotal	224 (100.0%)		2,053 (100.0%)		215 (100.0%)		4,293 (100.0%)	
Pediatric Subtotal	2		16		2		35	
Total	226		2,069		217		4,328	

**Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

*Throughout this document, whenever HIV disease is being discussed, the term "white" indicates a non-Hispanic white person, and "black" indicates a non-Hispanic black individual. All persons whose ethnicity is reported as Hispanic, regardless of race (e.g., white or black), are characterized as "Hispanic".

HIV Disease Epi Profile Summary: St. Louis HIV Region

Where

- Of the 2,069 cumulative HIV cases reported from the St. Louis HIV Region, 64.1% were from St. Louis City, 29.0% from St. Louis County, and 3.7% from St. Charles County. The remaining 68 (3.3%) cases came from the 4 other counties in the region; each of these counties had 1-41 reported cases. See Figure 9 in the “**Missouri**” section (page 25). Of the 1,093 cumulative HIV cases reported in blacks, the majority were from St. Louis City (784 cases, or 71.7%) and St. Louis County (300 cases, or 27.4%).
- Of the 4,328 cumulative AIDS cases reported from the St. Louis HIV Region, 2,582 (59.7%) were from St. Louis City, 1,416 (32.7%) from St. Louis County, and 156 (3.6%) from St. Charles County. The remaining 174 (4.0%) cases came from the 4 other counties in the region; each of these counties had 14-101 reported cases. See figure 10 in the “**Missouri**” section (page 25). Of the 1,871 cumulative AIDS cases reported in blacks, 1,276 (68.2%) were from St. Louis City and 824 (44.0%) from St. Louis County.
- Tables 3 and 4 summarize cumulative reported HIV and AIDS cases by area.
- Table 5 summarizes the numbers and rates of HIV cases reported in 2001 by race/ethnicity and area. The highest rates, and the largest numbers of reported cases, are from St. Louis City. For HIV cases reported in 2001, the rate for cases reported from St. Louis City (40.4) is approximately 6 times the rate for St. Louis County (6.4).
- Of the 135 HIV cases reported from St. Louis City in 2001, 66.7% were in blacks and 28.9% were in whites. Of the 64 HIV cases reported from St. Louis County in 2001, 53.1% were in blacks and 43.8% were in whites.
- Table 8 in the “**Missouri**” section (page 24) compares the numbers and rates of HIV and AIDS cases reported from persons in the St. Louis HIV Region (and in St. Louis City and County) with corresponding numbers and rates of HIV and AIDS cases reported from other areas in the state.

**Table 3. Reported HIV Cases by Race/Ethnicity and Area
St. Louis HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic		Hispanic	
	Cases	%	Cases	%	Cases	%	Cases	%
St. Louis City [†]	1,326	100.0%	525	39.6%	784	59.1%	8	0.6%
St. Louis County [†]	599	100.0%	283	47.2%	300	50.1%	10	1.7%
St. Charles County [†]	76	100.0%	71	93.4%	3	3.9%	1	1.3%
Remainder of Region [†]	68	100.0%	61	89.7%	6	8.8%	0	0.0%
St. Louis HIV Region [†]	2,069	100.0%	940	45.4%	1,093	52.8%	19	0.9%

[†]Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

**Table 4. Reported AIDS Cases by Race/Ethnicity and Area
St. Louis HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic		Hispanic	
	Cases	%	Cases	%	Cases	%	Cases	%
St. Louis City [†]	2,582	100.0%	1,271	49.2%	1,276	49.4%	27	1.0%
St. Louis County [†]	1,416	100.0%	824	58.2%	570	40.3%	16	1.1%
St. Charles County [†]	156	100.0%	147	94.2%	15	9.6%	4	2.6%
Remainder of Region [†]	174	100.0%	154	88.5%	10	5.7%	0	0.0%
St. Louis HIV Region [†]	4,328	100.0%	2,396	55.4%	1,871	43.2%	47	1.1%

[†]Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

HIV Disease Epi Profile Summary: St. Louis HIV Region

Table 5. Reported HIV Cases and Rates by Race/Ethnicity and Area, St. Louis HIV Region, 2001

Geographic Area	Total			White, Non-Hispanic			Black, Non-Hispanic			Hispanic		
	Cases	%	Rate*	Cases	%	Rate*	Cases	%	Rate*	Cases	%	Rate*
St. Louis City [†]	135	100.0%	40.4	39	28.9%	26.5	90	66.7%	51.1	2	1.5%	34.1
St. Louis County [†]	64	100.0%	6.4	28	43.8%	3.5	34	53.1%	20.6	1	1.6%	7.3
St. Charles County [†]	12	100.0%	4.3	12	100.0%	4.5	0	0.0%	0.0	0	0.0%	0.0
Remainder of Region [†]	15	100.0%	4.2	13	86.7%	3.8	1	6.7%	21.9	0	0.0%	0.0
St. Louis HIV Region [†]	226	100.0%	11.5	92	40.7%	5.9	125	55.3%	35.4	3	1.3%	10.9

*Per 100,000 population.

[†]Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

- Table 9 in the "Missouri" section (page 25) shows numbers and rates of HIV cases reported in 2001 by race/ethnicity for St. Louis City and County, and compares these figures with those for HIV cases reported from Kansas City and Outstate Missouri.
- Table 10 in the "Missouri" section (page 25) shows numbers and rates of HIV cases reported in 2001 by race/ethnicity for the St. Louis HIV Region, and compares these figures with those for HIV cases reported from Missouri's other HIV Regions.

**Table 6. AIDS Cases By County
Illinois: Five Counties in St. Louis Area
Cumulative Through December 2001**

COUNTY	AIDS CASES CUMULATIVE	
CLINTON	56	9.6%
JERSEY	5	0.9%
MADISON	177	30.5%
MONROE	9	1.5%
ST. CLAIR	334	57.5%
TOTAL	581	100.0%

*Clinton, Jersey, Madison, Monroe, and St. Clair Counties.

**Table 7: AIDS Cases By Exposure Category
Illinois: Five Counties in St. Louis Area
Cumulative Through December 2001**

EXPOSURE CATEGORY	AIDS CASES CUMULATIVE	
ADULT/ADOLESCENT		
MEN WHO HAVE SEX WITH MEN	354	61.8%
MEN WHO HAVE SEX WITH MEN & INJECT DRUGS	23	4.0%
INJECTING DRUG USE	80	14.0%
HETEROSEXUAL CONTACT	44	7.7%
HEMOPHILIA/BLOOD TRANSFUSION	29	5.1%
RISK NOT SPECIFIED	43	7.5%
ADULT/ADOLESCENT SUBTOTAL	573	100.0%
PEDIATRIC (<13 YEARS OLD)		
MOTHER WITH/AT RISK OF HIV INFECTION	5	62.5%
OTHER/UNKNOWN	3	37.5%
PEDIATRIC SUBTOTAL	8	100.0%
TOTAL	581	

*Clinton, Jersey, Madison, Monroe, and St. Clair Counties.

**Table 8. AIDS Cases By Gender
Race/Ethnicity, and Age Group
Illinois: Five Counties* in St. Louis Area
Cumulative Through December 2001**

	AIDS CASES CUMULATIVE	
GENDER		
MALES	521	89.7%
FEMALES	60	10.3%
RACE/ETHNICITY		
WHITE	303	52.2%
BLACK	264	45.4%
HISPANIC	13	2.2%
OTHER/UNKNOWN	1	0.2%
AGE GROUP		
<13	8	1.4%
13-19	10	1.7%
20-29	113	19.4%
30-39	265	45.6%
40-49	136	23.4%
>49	49	8.4%
TOTAL	581	

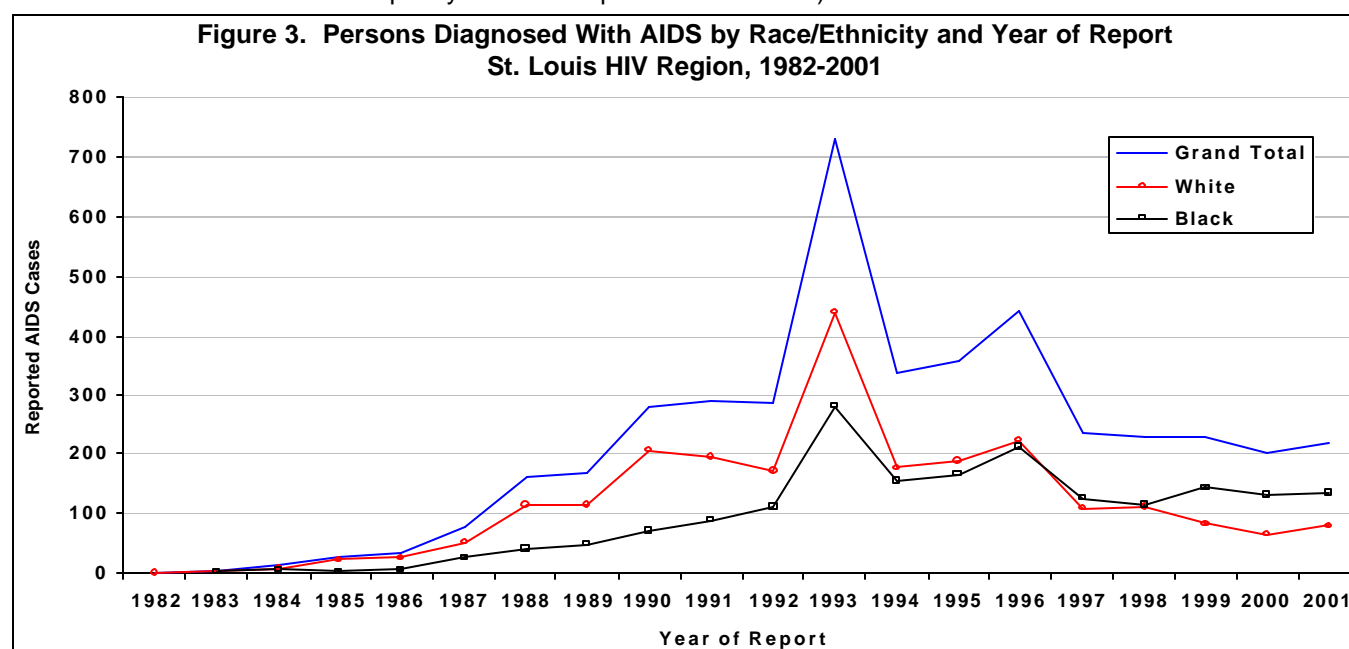
*Clinton, Jersey, Madison, Monroe, and St. Clair Counties.

HIV Disease Epi Profile Summary: St. Louis HIV Region

- Figures 20 and 21 on page 121 show reported HIV and AIDS cases for St. Louis City and County by zip code area.
- Figure 8 in the “Missouri” section (page 23) shows, for the counties within St. Louis HIV Region (as well as for the entire state), the numbers of living HIV Disease cases who have been reported to the Missouri Department of Health and Senior Services and who were residents of these counties when diagnosed.
- Tables 6, 7, and 8 provide information on AIDS cases in the five Illinois counties which are part of the St. Louis Metropolitan area.

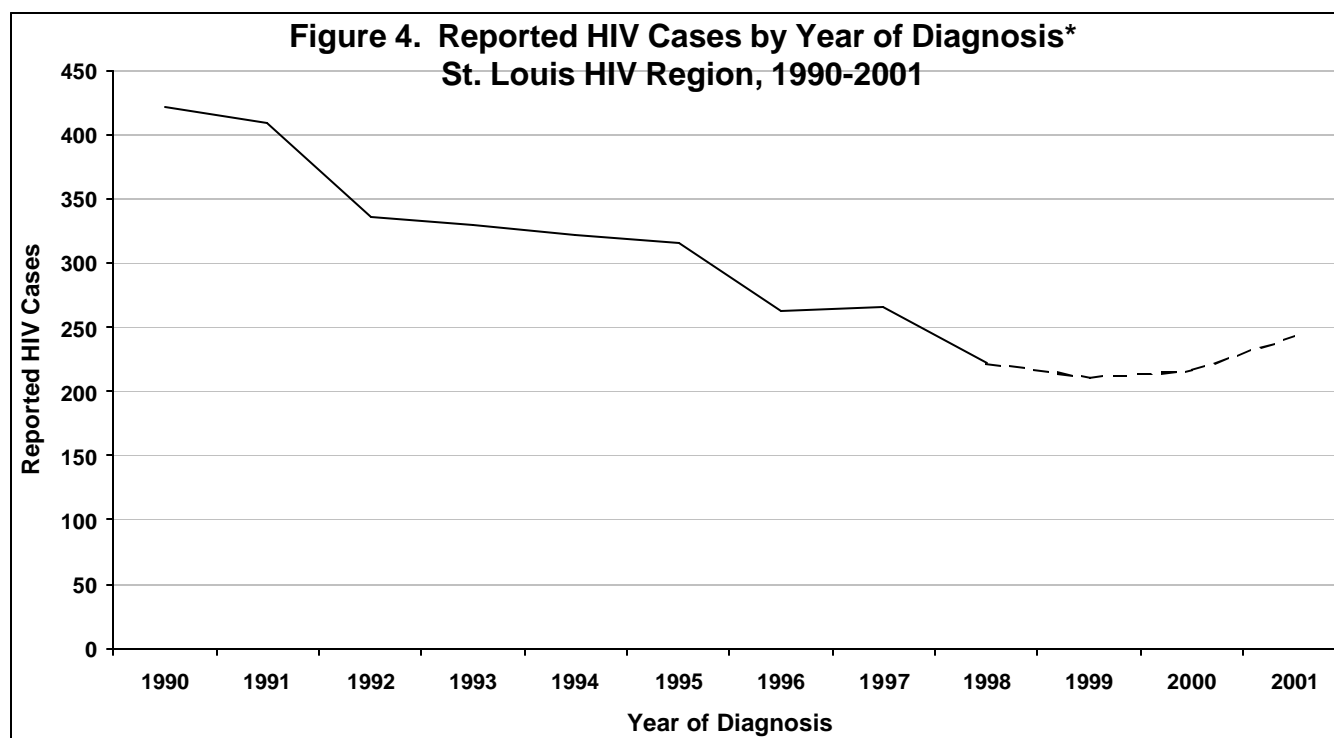
Trends

- The 325 HIV Disease cases initially reported in St. Louis HIV Region residents in 2001 represented a 32.7% increase from the 245 cases reported in 2000 (see Figure 1 on page 101).
- The 217 AIDS cases reported in St. Louis HIV Region residents in 2001 represented a 7.4% increase from the 202 cases reported in 2000 (see Figure 2 on page 102).
- From 2000 to 2001, the number of reported AIDS cases in whites increased by 12.7% (from 71 cases reported in 2000 to 80 cases in 2001), while the number of reported cases in blacks increased by 1.5% (from 133 cases reported in 2000 to 135 cases in 2001). See Figure 3.
- The 2,026 persons living with AIDS at the end of 2001 represent a 7.7% increase over the 1,882 individuals living with AIDS at the end of 2000.
- The following describe additional trends in reported AIDS cases. Such trends may provide indications as to which groups are increasingly becoming involved in the epidemic:
 - In recent years, women have, in general, been making up a larger proportion of annually reported AIDS cases. Of AIDS cases reported in 2001, 19.8% were in females. By comparison, of AIDS cases reported five years previously (in 1996), only 11.5% were in females.
 - Blacks have likewise generally been making up a larger proportion of annually reported AIDS cases, and during each of the last three years have made up more than 60% of all reported cases (62.2% of AIDS cases reported in 2001). Five years previously (in 1996), blacks made up 48.0% of reported cases. Figure 3 shows AIDS cases in whites and blacks by year of report. Beginning in 1997, more AIDS cases have been reported each year in blacks than in whites.
 - Heterosexual contacts have, from the mid-1980's through 2000, generally been making up a larger proportion of annually reported AIDS cases. For AIDS cases reported in 2001, it is estimated that eventually about 24% will be placed in the heterosexual contact exposure category (see Table 2), which is slightly less than the approximately 30% of cases reported in 2000 which were classified as heterosexual contacts. Five years previously (in 1996), heterosexual contacts made up only 10.4% of reported AIDS cases).



HIV Disease Epi Profile Summary: St. Louis HIV Region

- Comparing reported HIV cases (which generally represent persons more recently infected with HIV) with reported AIDS cases (which generally represent persons less recently infected) is another potential means of discerning which groups are increasingly becoming involved in the epidemic.*
 - As indicated in Table 1 (on page 103), a higher proportion of cumulative HIV cases, compared to cumulative AIDS cases, are female and black, providing evidence that among more recently infected persons a larger proportion are female and black.
 - In Table 2 (page 103), cases currently placed in the “Other/Unknown” exposure category have been reassigned to a specific exposure category (such as MSM or heterosexual contact) based on past experience in reassigning such cases following investigation. As a result, HIV and AIDS cases can be better compared with regard to involvement in the epidemic by persons in different exposure categories. The data contained in Table 2 (page 103) indicate that a lower proportion of cumulative HIV cases, compared to cumulative AIDS cases, are MSM, and a higher proportion are heterosexual contacts. This provides evidence that among more recently infected persons, a smaller proportion are MSM and a larger proportion are heterosexual contacts. (However, the largest number of new infections likely continue to result from male homosexual contact.)
- Figure 4 shows reported HIV cases[†] by year of diagnosis^{††} for the period from 1990-2001. The annual number of diagnosed HIV cases generally decreased through the year 1999; a small increase was seen 2000. In 2001, approximately 245 new HIV cases are estimated to have been diagnosed, an increase of about 25 cases from the preceding year.
- Figures 5-9 show reported HIV cases[†] by year of diagnosis^{††} according to gender, race/ethnicity, race/ethnicity and gender, age group, and exposure category. (Some caution should be exercised in interpreting these graphs, and the similar graphs which follow, given the fact that the numbers for more recent years are estimates that attempt to adjust for reporting delays.)
- The increases in diagnosed HIV cases from 2000 to 2001 were most noticeable in white males, persons 40-49 years of age, and MSM. However, smaller increases were seen in certain other groups, as shown in the figures.

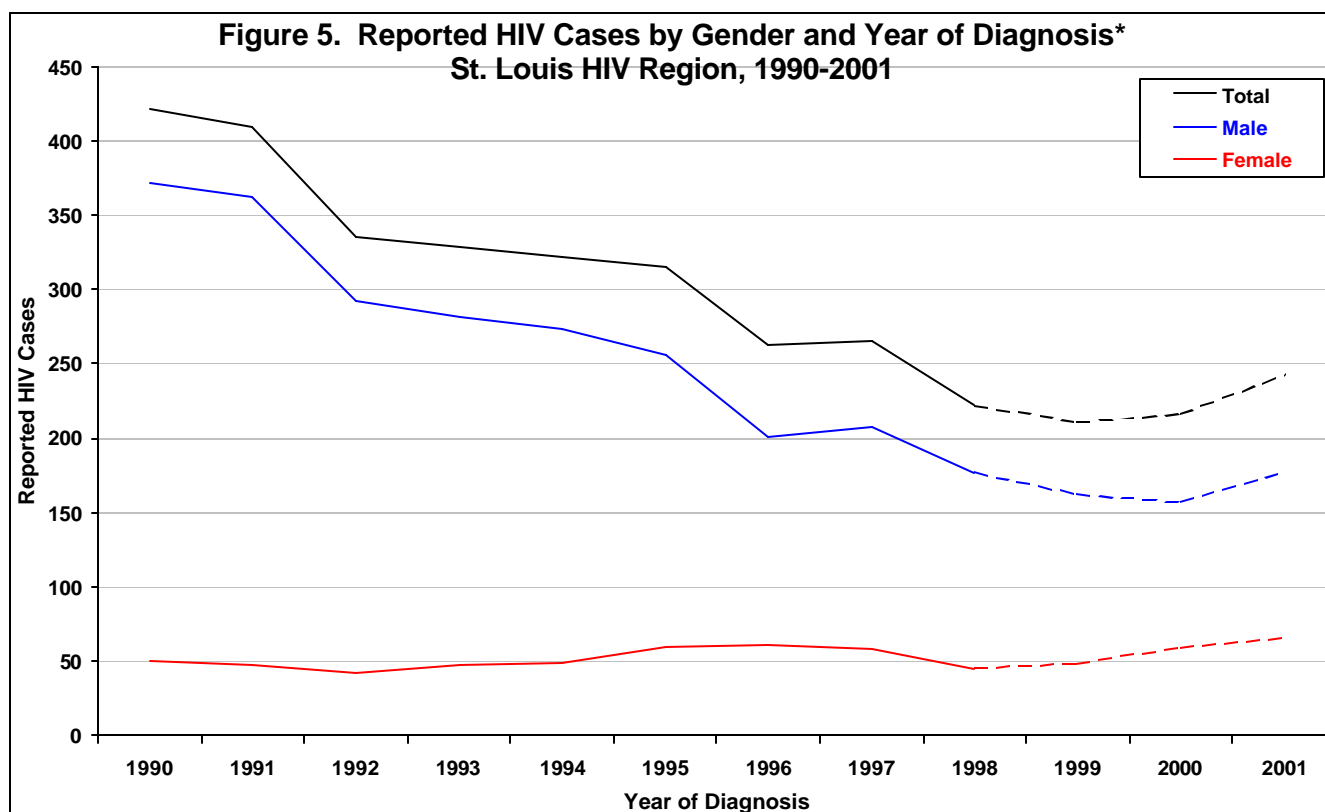


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

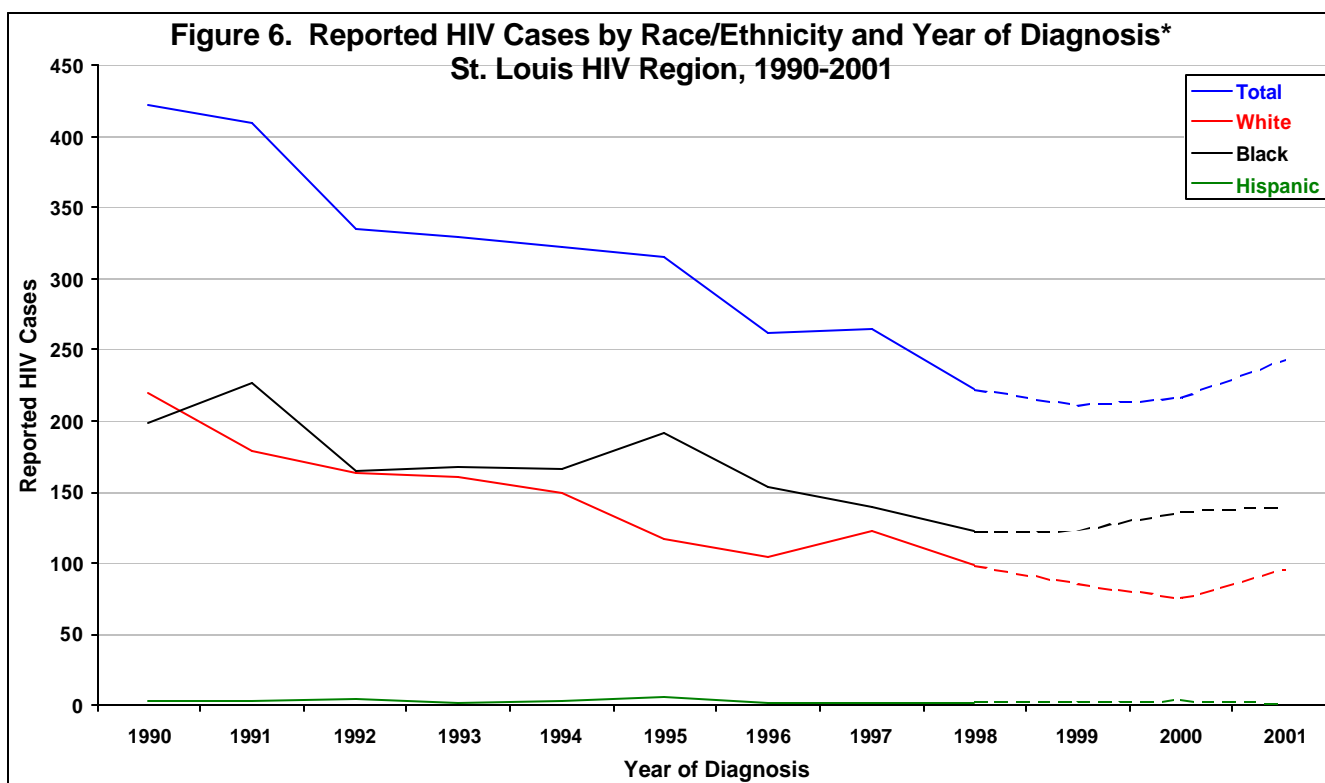
[†] The HIV cases shown in Figures 4-9 represent individuals who were HIV cases (i.e., HIV infected but not AIDS) at the time of initial diagnosis of HIV infection. Some of these individuals have subsequently progressed to AIDS, while the rest currently remain HIV cases. However, in these figures, where the emphasis is on status at the time of initial diagnosis, all are considered HIV cases. (This is in contrast to the way data is presented in Table 1 and similar tables. In these tables, once an individual who is an HIV case meets the case definition for AIDS, he or she is no longer counted as an HIV case, and instead is counted as an AIDS case.)

^{††} Adjustments were made for delays in reporting of cases. That is, for more recent years, not all cases diagnosed during these years have been reported as yet. To adjust for this, estimates were made, based on past experience, of the additional number of cases expected to ultimately be reported, and these expected cases were added to those already reported to give the estimated total number of cases for a given year as shown in the figure.

HIV Disease Epi Profile Summary: St. Louis HIV Region

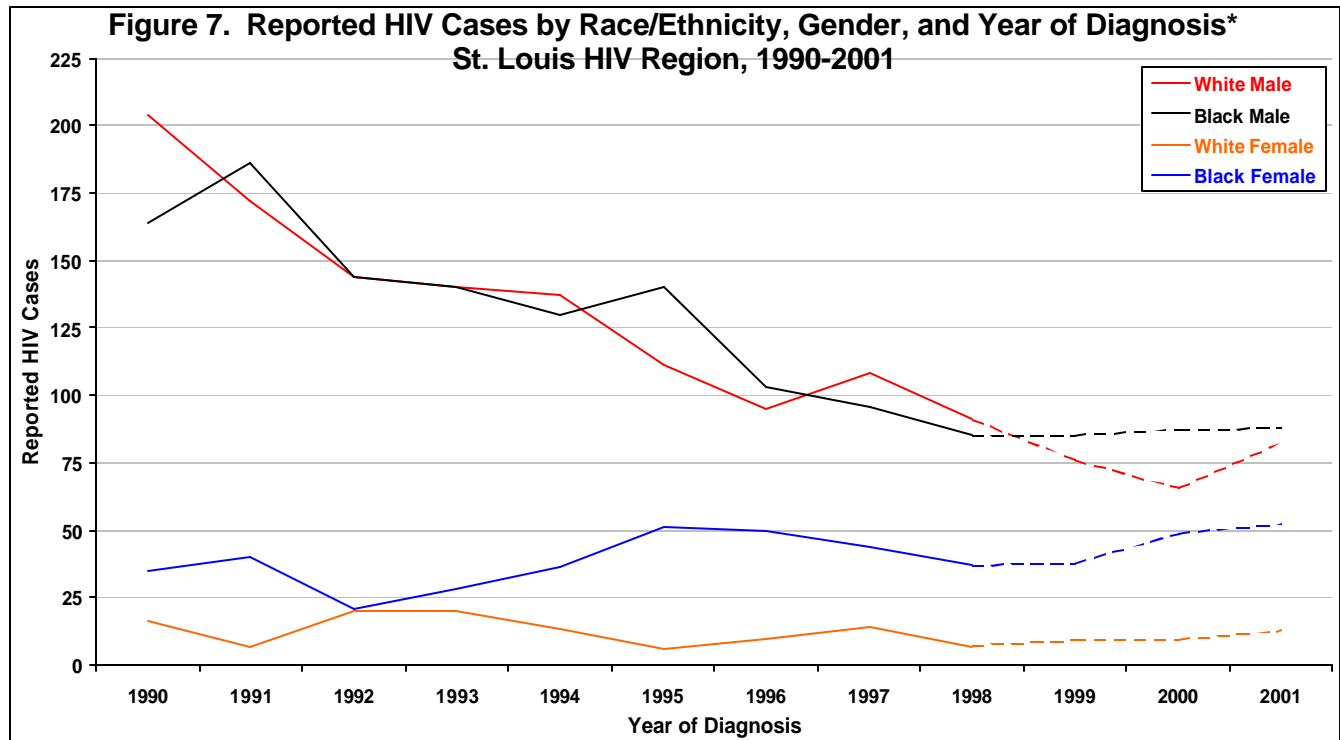


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

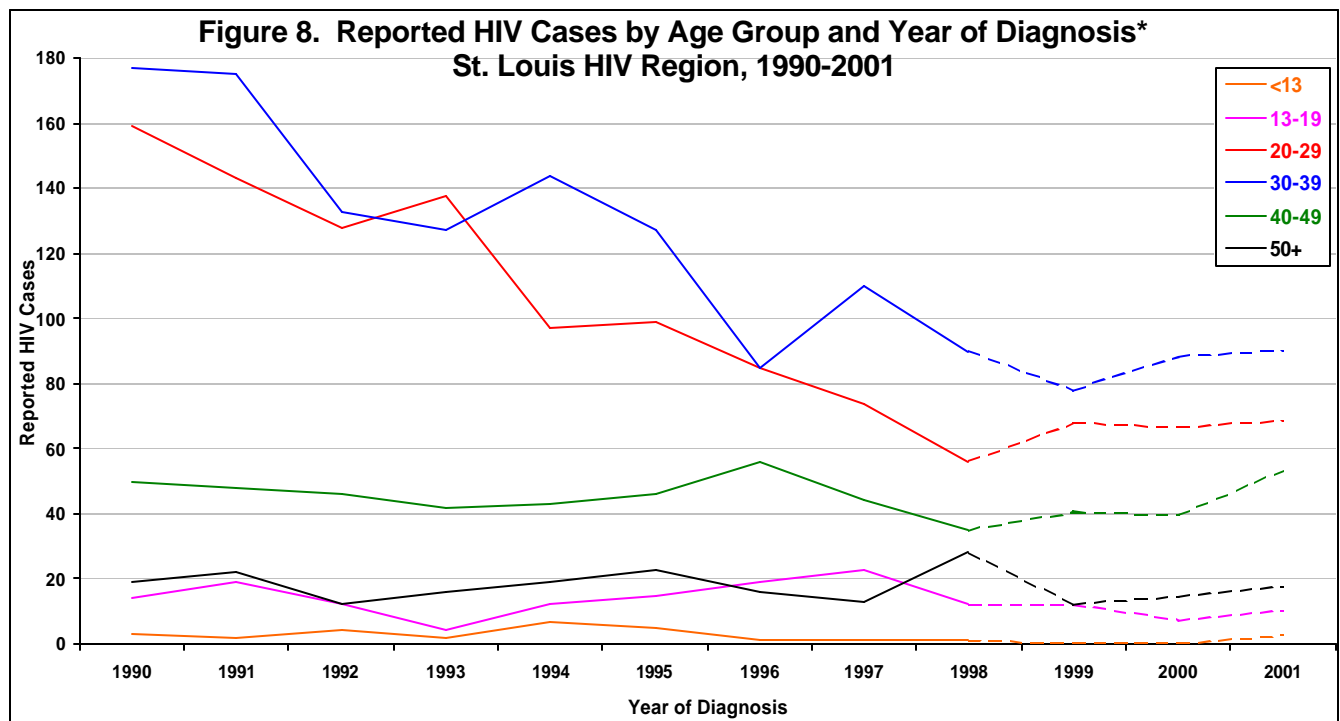


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: St. Louis HIV Region

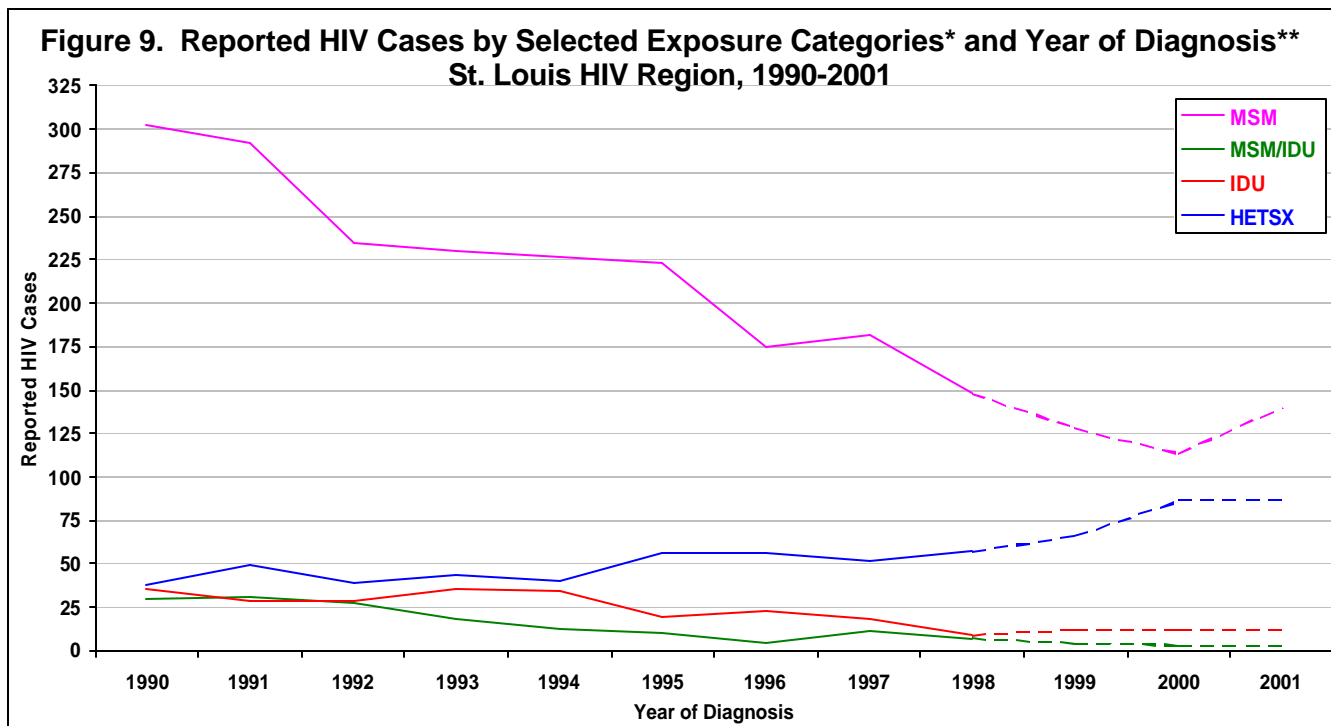


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: St. Louis HIV Region



*MSM = men who have sex with men; MSM/IDU = men who have sex with men and inject drugs; IDU = injecting drug user; HETSX = heterosexual contact. Cases currently classified as "Risk Not Specified" (RNS), many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in diagnosed HIV cases. The proportion assigned to a given exposure category is based on past experience with RNS cases whose exposure risk has been discovered following investigation. Such experience indicates that almost all RNS cases whose exposure risk is eventually determined will be placed in one of the four exposure categories shown in this figure.

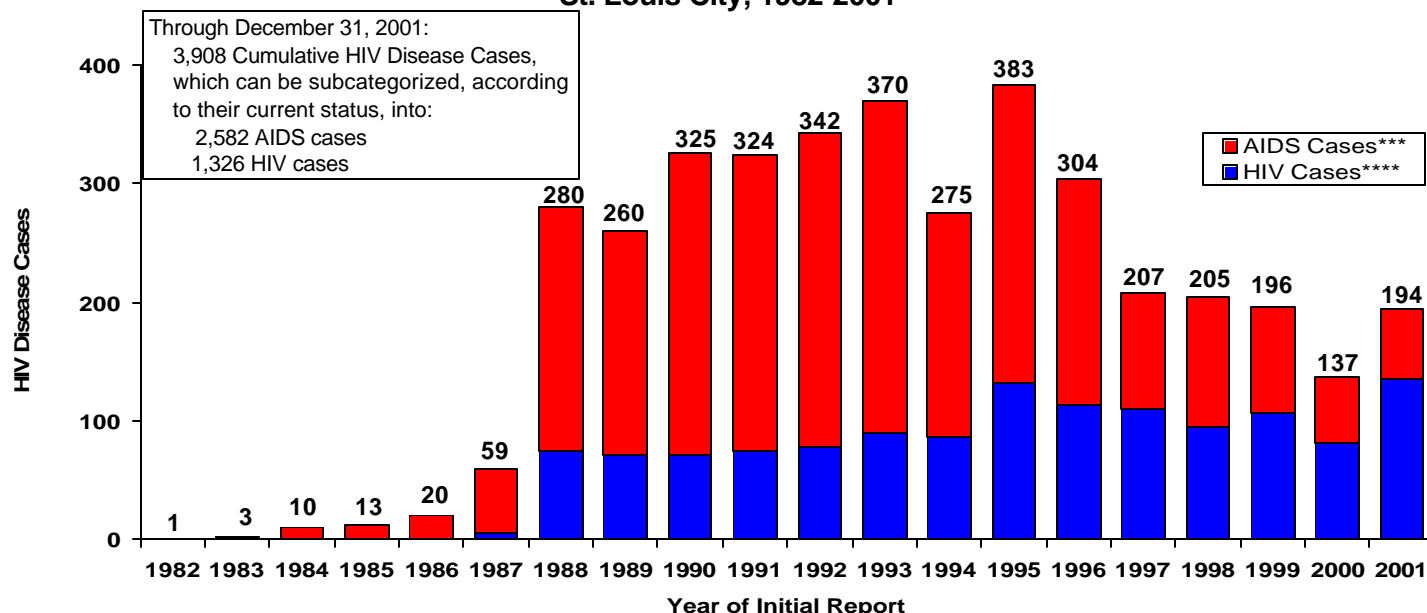
**Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

- Trends in diagnosed HIV cases are somewhat different if only cases from St. Louis City are examined. In St. Louis City in 2001, approximately 155 new HIV cases are estimated to have been diagnosed, an increase of about 40 cases from the preceding year. This corresponds to a larger rate of increase in diagnosed cases from 2000 to 2001 than was seen in the region as a whole. The increase in diagnosed cases in St. Louis City in 2001 was most noticeable in black males (although smaller increases in white males and black females were also seen), persons 20-29 years of age, and MSM. See Figures 11-14 on pages 116 and 117.
- Trends in diagnosed HIV cases from St. Louis County differs from those seen in either St. Louis City or the region as a whole. In 2001, approximately 65 new HIV cases are estimated to have been diagnosed, a decrease of about 15 cases from the preceding year. See Figures 16-19 on pages 119 and 120.

HIV Disease Epi Profile Summary: St. Louis HIV Region

Summary of HIV Disease Cases in St. Louis City

Figure 10. Reported HIV Disease Cases by Current Status* and Year of Initial Report
St. Louis City, 1982-2001**



*HIV Cases vs. AIDS Cases
 **Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)
 ***These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition; or 2) initially reported as an AIDS case.
 ****These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

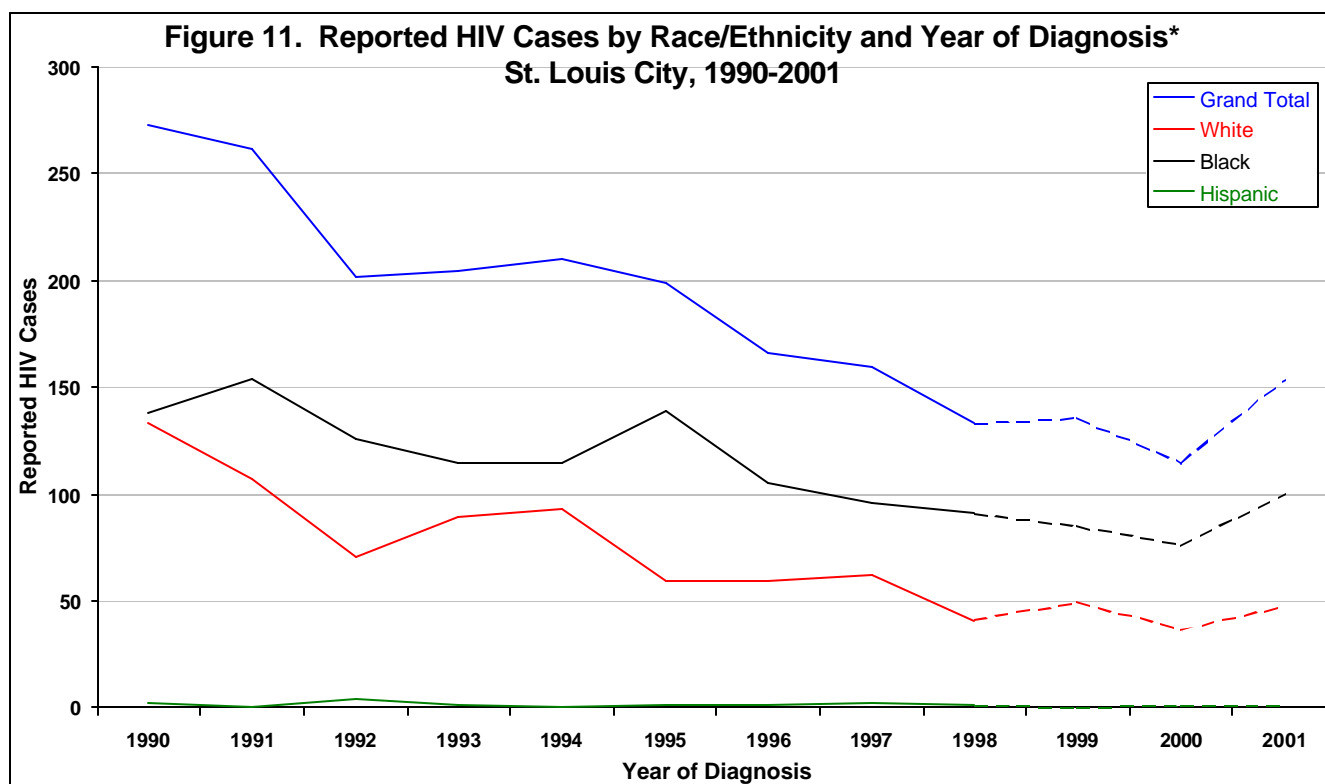
**Table 9. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Adjusted Exposure Category*,
St. Louis City, Reported 2001 and Cumulative Through December 2001**

	HIV Cases				AIDS Cases				HIV/AIDS Cases	
	Reported 2001** Cases	%	Cumulative Cases	%	Reported 2001 Cases	%	Cumulative Cases	%	Cumulative Cases	%
Gender										
Male	102	(75.6%)	1,097	(82.7%)	110	(78.6%)	2,310	(89.5%)	3,407	(87.2%)
Female	33	(24.4%)	229	(17.3%)	30	(21.4%)	272	(10.5%)	501	(12.8%)
Race/Ethnicity										
White	39	(28.9%)	525	(39.6%)	47	(33.6%)	1,271	(49.2%)	1,796	(46.0%)
Black	90	(66.7%)	784	(59.1%)	91	(65.0%)	1,276	(49.4%)	2,060	(52.7%)
Hispanic	2	(1.5%)	8	(0.6%)	0	(0.0%)	27	(1.0%)	35	(0.9%)
Asian/Pacific Islander	0	(0.0%)	0	(0.0%)	2	(1.4%)	6	(0.2%)	6	(0.2%)
American Indian	0	(0.0%)	1	(0.1%)	0	(0.0%)	2	(0.1%)	3	(0.1%)
Unknown	4	(3.0%)	8	(0.6%)	0	(0.0%)	0	(0.0%)	8	(0.2%)
Adjusted Exposure Category*										
Men Who Have Sex With Men	83	(61.5%)	903	(68.1%)	88	(62.7%)	1,929	(74.7%)	2,832	(72.5%)
Men Who Have Sex With Men & Inject Drugs	2	(1.5%)	57	(4.3%)	7	(5.0%)	191	(7.4%)	248	(6.3%)
Injecting Drug Users	5	(3.7%)	94	(7.1%)	11	(7.9%)	184	(7.1%)	278	(7.1%)
Heterosexual Contact	43	(31.9%)	255	(19.2%)	30	(21.4%)	234	(9.1%)	489	(12.5%)
Hemophilia/Coagulation Disorder	0	(0.0%)	5	(0.4%)	1	(0.7%)	16	(0.6%)	21	(0.5%)
Blood Trans. or Tissue Recipient	0	(0.0%)	3	(0.2%)	1	(0.7%)	10	(0.4%)	13	(0.3%)
Adult Risk Not Specified	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Perinatal Transmission	2	(1.5%)	8	(0.6%)	2	(1.4%)	16	(0.6%)	24	(0.6%)
Pediatric Hemophilia	0	(0.0%)	1	(0.1%)	0	(0.0%)	0	(0.0%)	1	(0.0%)
Pediatric Blood Transfusion	0	(0.0%)	0	(0.0%)	0	(0.0%)	2	(0.1%)	2	(0.1%)
Missouri Total	135 (100.0%)		1,326 (100.0%)		140 (100.0%)		2,582 (100.0%)		3,908 (100.0%)	

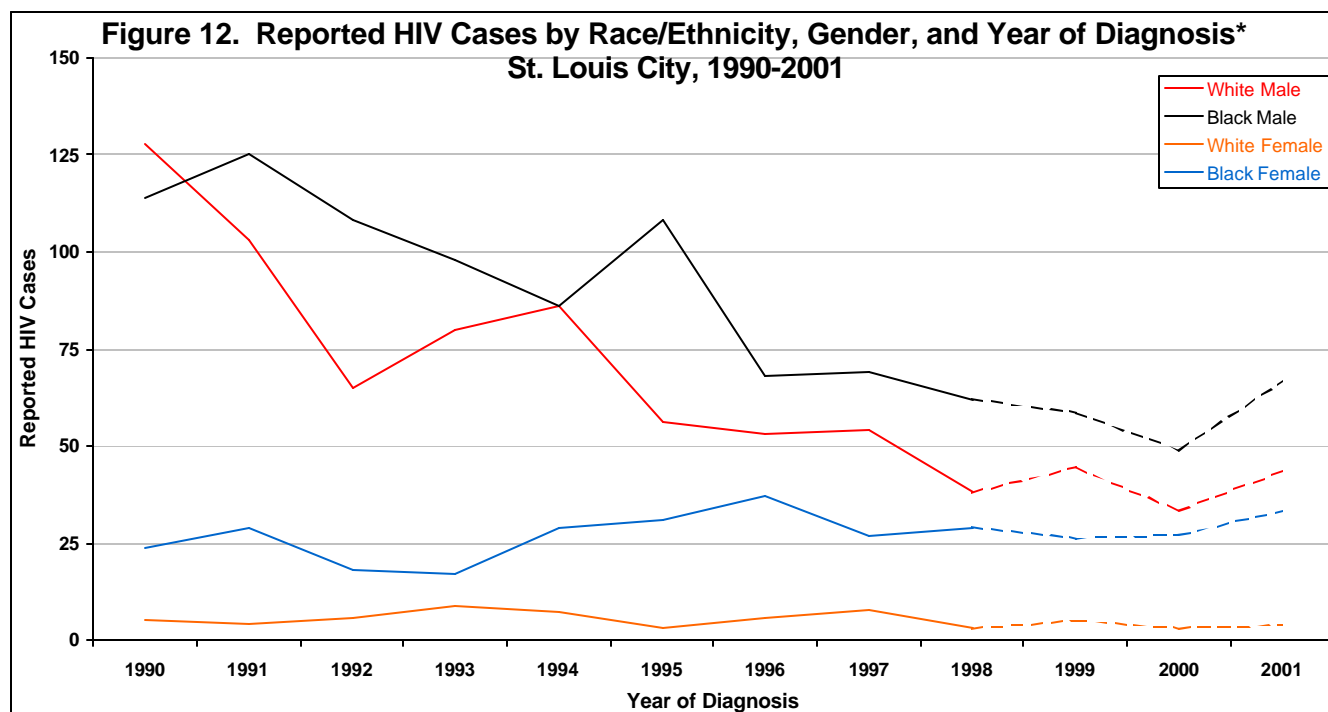
* Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

** HIV cases reported in 2001 which remained HIV cases at the end of that year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included.

HIV Disease Epi Profile Summary: St. Louis HIV Region

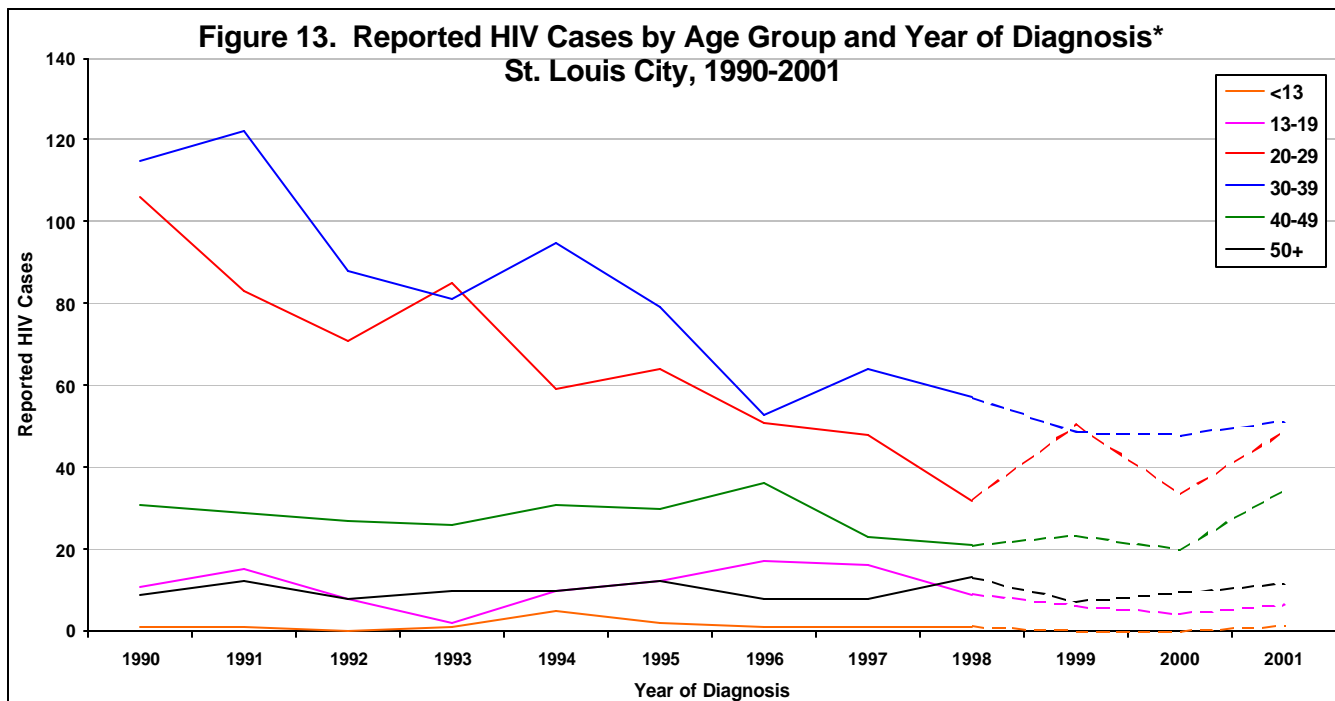


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

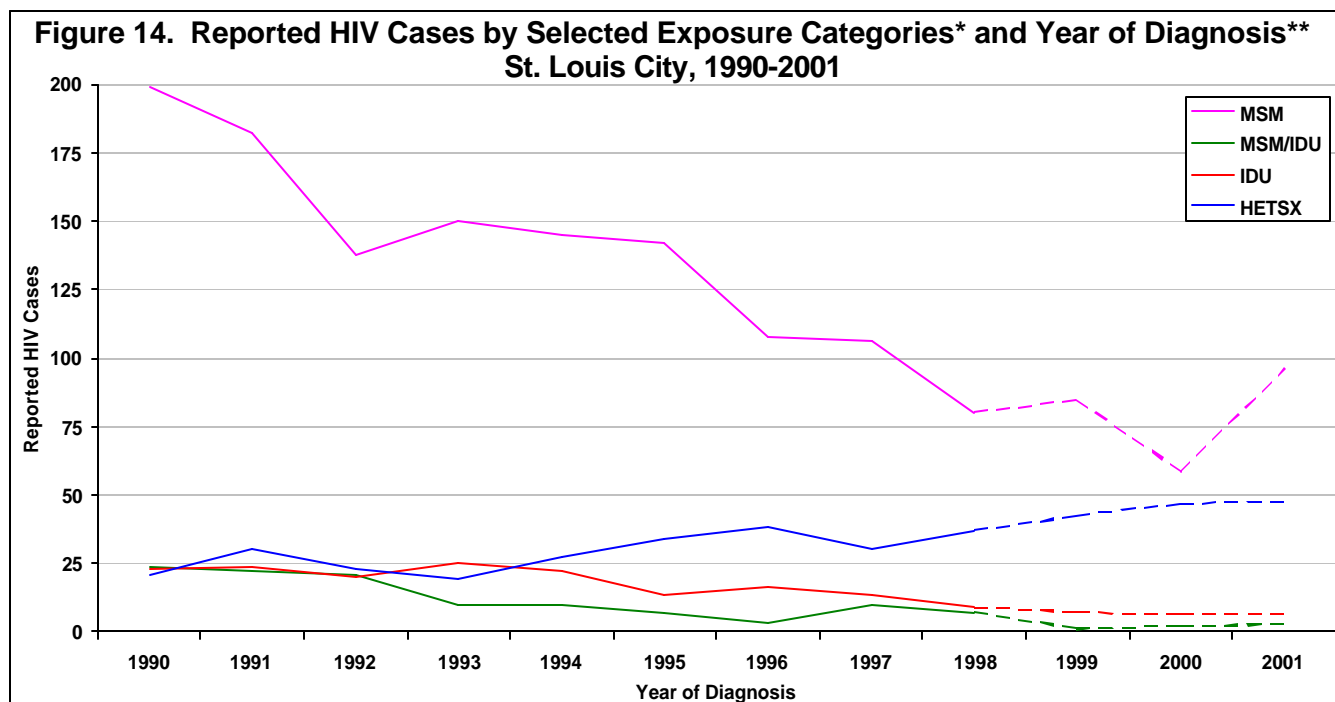


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: St. Louis HIV Region



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



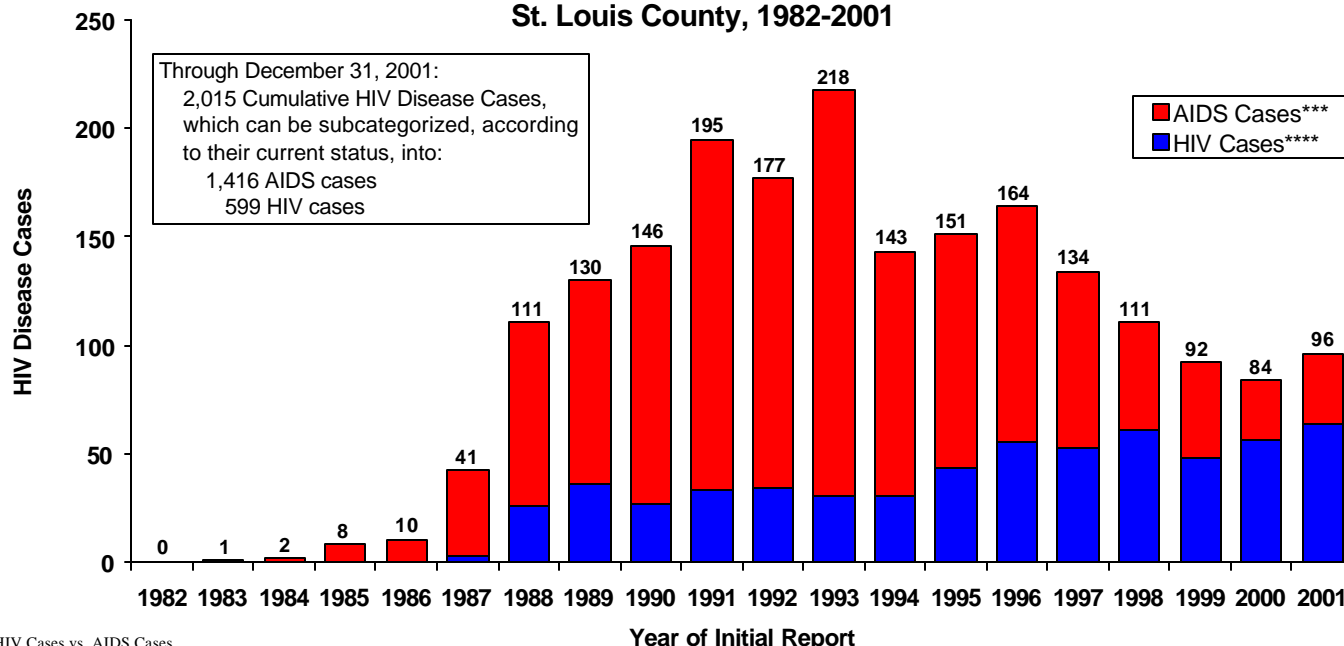
*MSM = men who have sex with men; MSM/IDU = men who have sex with men and inject drugs; IDU = injecting drug user; HETSX = heterosexual contact. Cases currently classified as "Risk Not Specified" (RNS), many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in diagnosed HIV cases. The proportion assigned to a given exposure category is based on past experience with RNS cases whose exposure risk has been discovered following investigation. Such experience indicates that almost all RNS cases whose exposure risk is eventually determined will be placed in one of the four exposure categories shown in this figure.

**Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: St. Louis HIV Region

Summary of HIV Disease Cases in St. Louis County

Figure 15. Reported HIV Disease Cases by Current Status* and Year of Initial Report
St. Louis County, 1982-2001**



*HIV Cases vs. AIDS Cases

**Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)

***These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition; or 2) initially reported as an AIDS case.

****These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

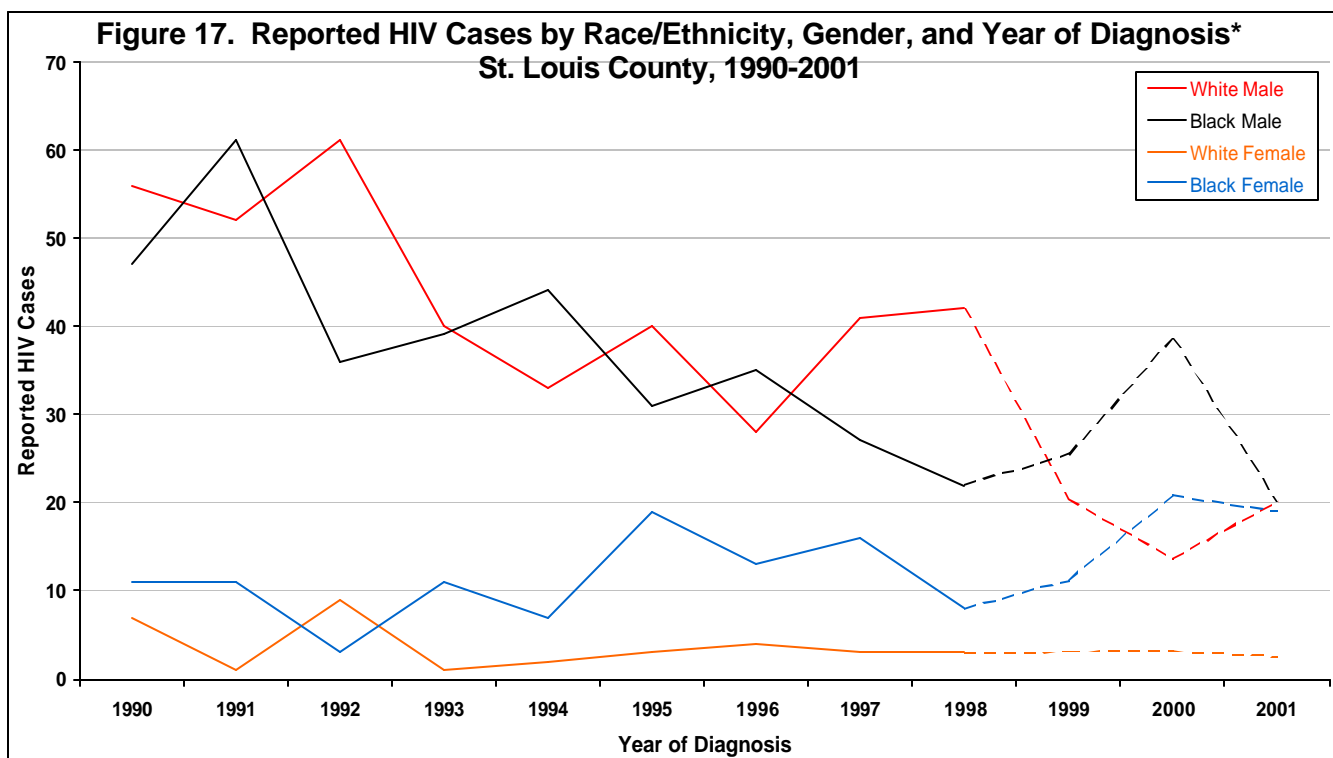
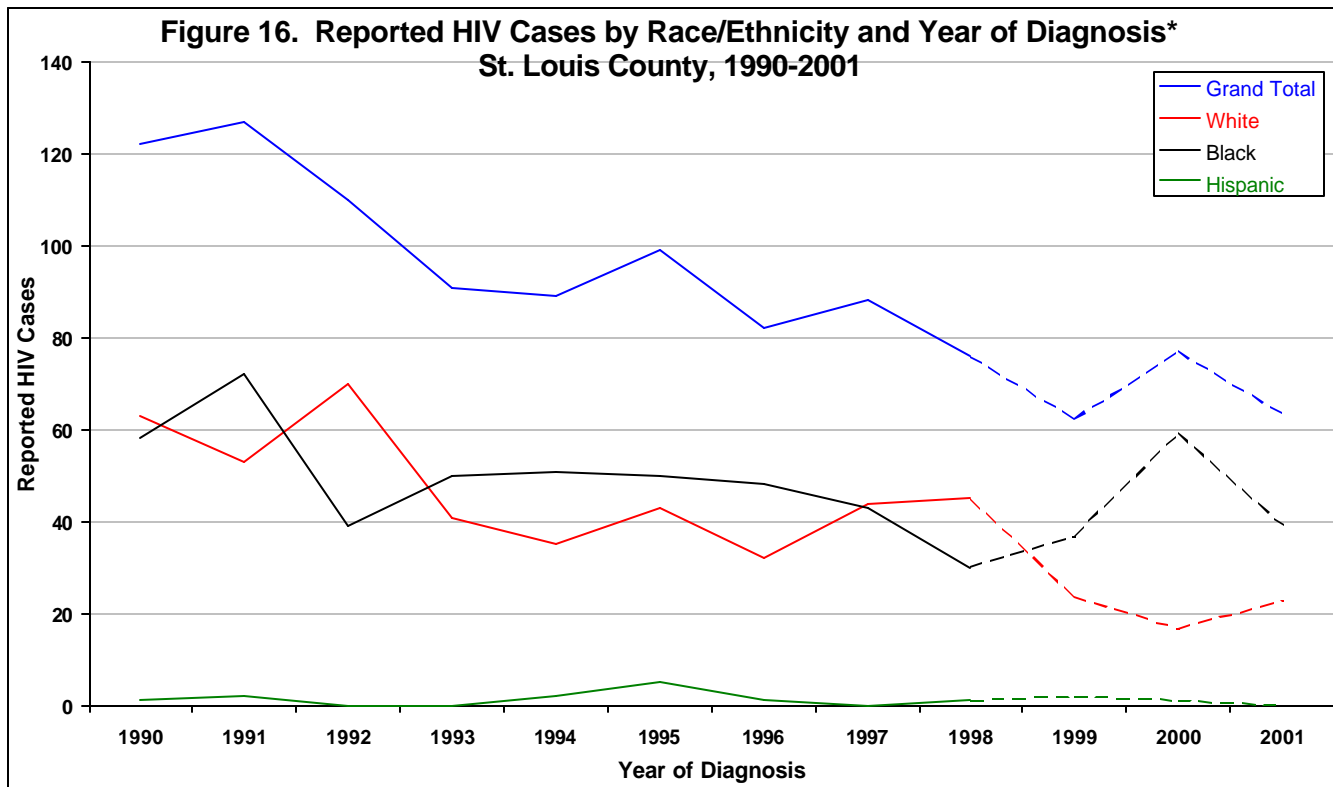
**Table 10. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Adjusted Exposure Category*,
St. Louis County, Reported 2001 and Cumulative Through December 2001**

	HIV Cases				AIDS Cases				HIV/AIDS Cases	
	Reported 2001** Cases	%	Cumulative Cases	%	Reported 2001 Cases	%	Cumulative Cases	%	Cumulative Cases	%
Gender										
Male	44	(68.8%)	485	(81.0%)	55	(85.9%)	1,273	(89.9%)	1,758	(87.2%)
Female	20	(31.2%)	114	(19.0%)	9	(14.1%)	143	(10.1%)	257	(12.8%)
Race/Ethnicity										
White	28	(43.8%)	283	(47.2%)	22	(34.4%)	824	(58.2%)	1,107	(54.9%)
Black	34	(53.1%)	300	(50.1%)	42	(65.6%)	570	(40.3%)	870	(43.2%)
Hispanic	1	(1.6%)	10	(1.7%)	0	(0.0%)	16	(1.1%)	26	(1.3%)
Asian/Pacific Islander	0	(0.0%)	3	(0.5%)	0	(0.0%)	5	(0.4%)	8	(0.4%)
American Indian	0	(0.0%)	1	(0.2%)	0	(0.0%)	1	(0.1%)	2	(0.1%)
Unknown	1	(1.6%)	2	(0.3%)	0	(0.0%)	0	(0.0%)	2	(0.1%)
Adjusted Exposure Category*										
Men Who Have Sex With Men	29	(45.3%)	403	(67.3%)	37	(57.8%)	1,057	(74.6%)	1,460	(72.5%)
Men Who Have Sex With Men & Inject Drugs	0	(0.0%)	13	(2.2%)	2	(3.1%)	61	(4.3%)	74	(3.7%)
Injecting Drug Users	2	(3.1%)	24	(4.0%)	5	(7.8%)	83	(5.9%)	107	(5.3%)
Heterosexual Contact	33	(51.6%)	148	(24.7%)	18	(28.1%)	155	(10.9%)	303	(15.0%)
Hemophilia/Coagulation Disorder	0	(0.0%)	6	(1.0%)	0	(0.0%)	29	(2.0%)	35	(1.7%)
Blood Trans. or Tissue Recipient	0	(0.0%)	2	(0.3%)	2	(3.1%)	20	(2.4%)	22	(1.1%)
Adult Risk Not Specified	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Perinatal Transmission	0	(0.0%)	3	(0.5%)	0	(0.0%)	8	(0.6%)	11	(0.5%)
Pediatric Hemophilia	0	(0.0%)	0	(0.0%)	0	(0.0%)	1	(0.1%)	1	(0.1%)
Pediatric Blood Transfusion	0	(0.0%)	0	(0.0%)	0	(0.0%)	2	(0.1%)	2	(0.1%)
Missouri Total	64 (100.0%)		599 (100.0%)		64 (100.0%)		1,416 (100.0%)		2,015 (100.0%)	

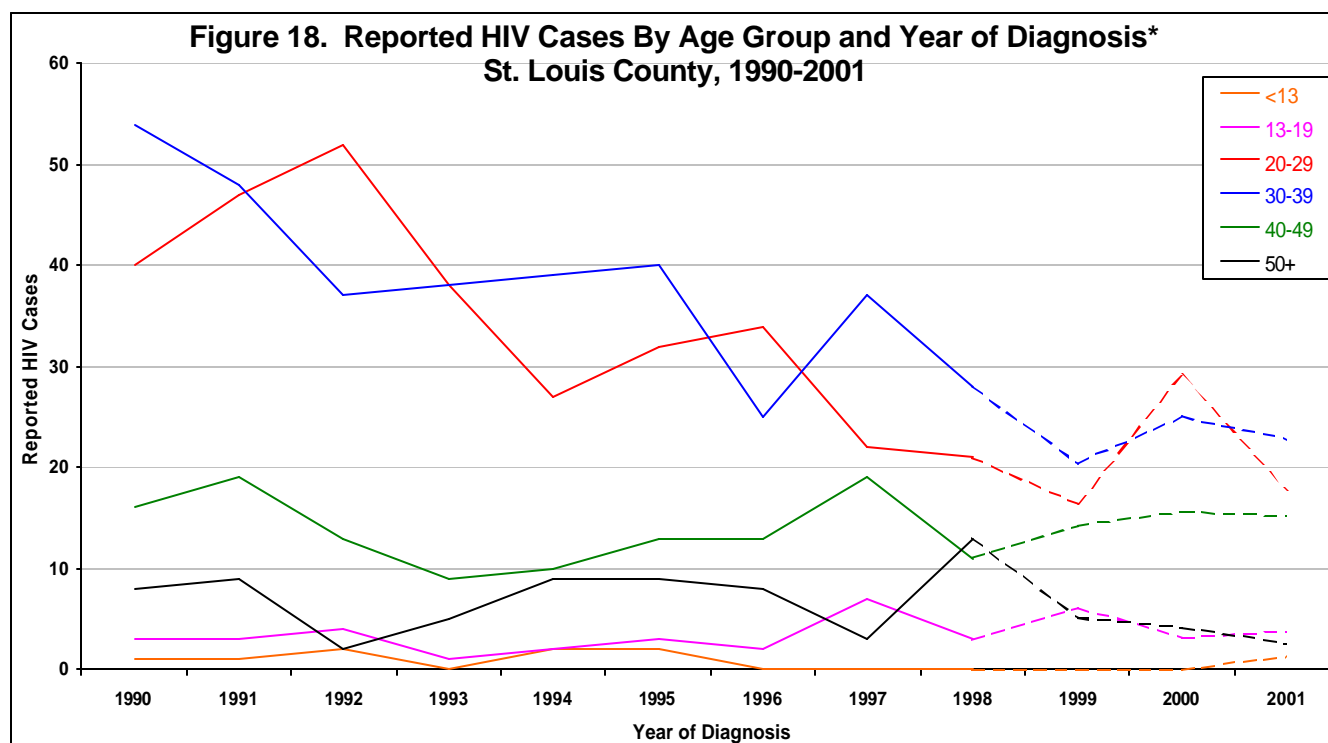
* Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

** HIV cases reported in 2001 which remained HIV cases at the end of that year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included.

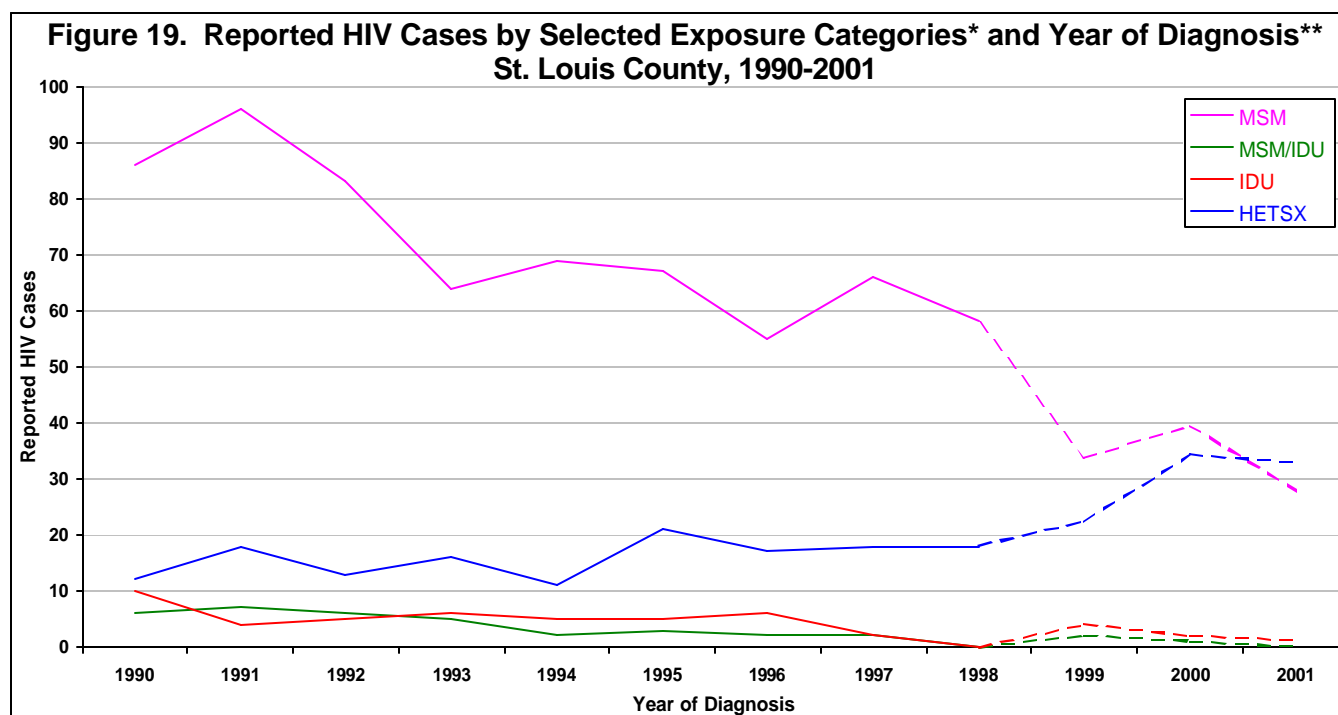
HIV Disease Epi Profile Summary: St. Louis HIV Region



HIV Disease Epi Profile Summary: St. Louis HIV Region



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*MSM = men who have sex with men; MSM/IDU = men who have sex with men and inject drugs; IDU = injecting drug user; HETSX = heterosexual contact. Cases currently classified as "Risk Not Specified" (RNS), many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in diagnosed HIV cases. The proportion assigned to a given exposure category is based on past experience with RNS cases whose exposure risk has been discovered following investigation. Such experience indicates that almost all RNS cases whose exposure risk is eventually determined will be placed in one of the four exposure categories shown in this figure.

**Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: St. Louis HIV Region

Figure 20.
Reported HIV Cases by Zip Code Area, St. Louis City and St. Louis County
Cumulative Through December 2001

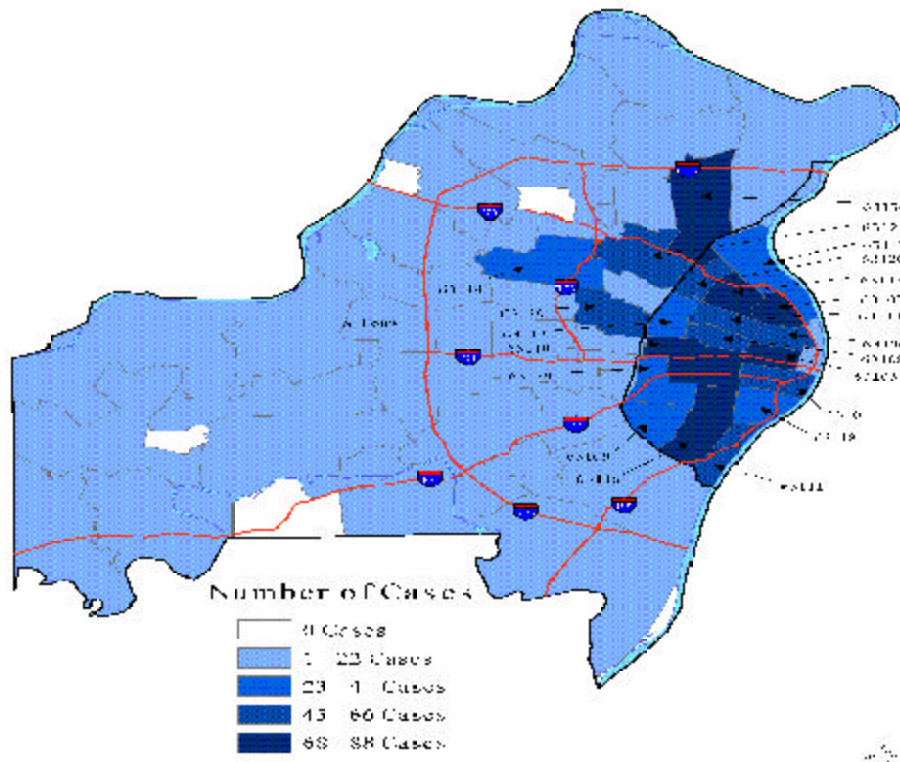
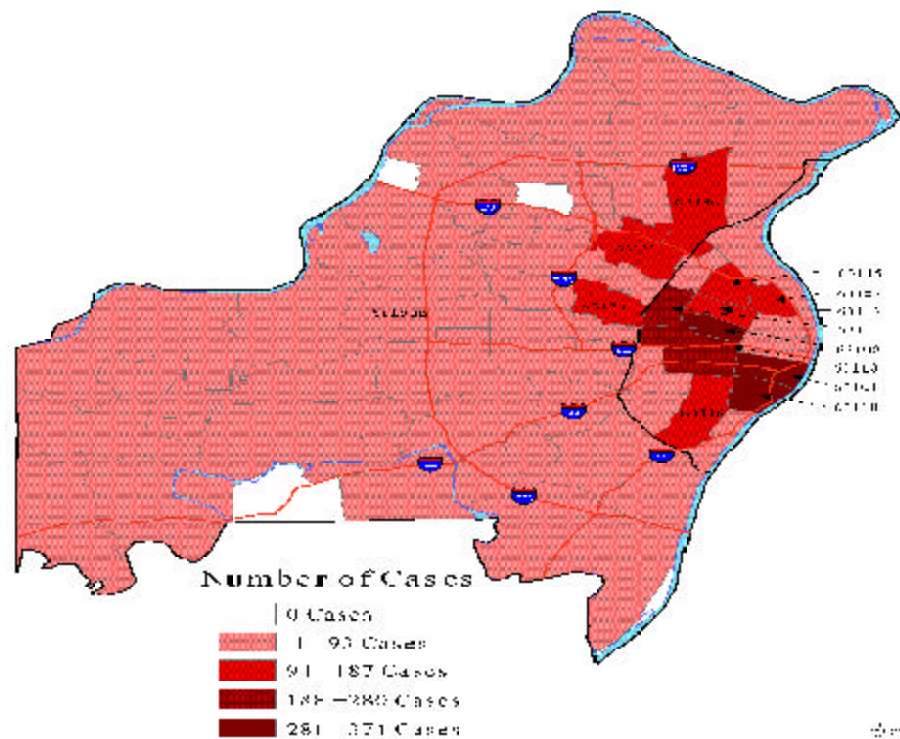


Figure 21.
Reported AIDS Cases by Zip Code Area, St. Louis City and St. Louis County
Cumulative Through December 2001



Men Who Have Sex With Men

Magnitude of the Problem

- From 1982 through 2001, a total of 4,457 HIV Disease cases in men who have sex with men (MSM) have been reported in St. Louis HIV Region residents (these cases make up 70.2% of all reported adult/adolescent HIV Disease cases in the region). Of these 4,457 HIV Disease cases, 3,162 (70.9%) are AIDS cases and 1,295 (29.1%) are HIV cases.
- The 3,162 AIDS cases make up 73.7% of all reported adult/adolescent AIDS cases in the region. In 2001, of the 215 adult/adolescent AIDS cases reported, 118 (54.9%) has, to date, been identified as being in MSM.
- The 1,295 HIV cases make up 63.1% of all reported adult/adolescent HIV cases in the region. In 2001, of the 224 adult/adolescent HIV cases reported, 84 (37.5%) has, to date, been identified as being in MSM.
- These numbers, however, do not indicate the full extent of MSM involvement since for 65 adult/adolescent AIDS cases, and 153 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 103). Here it is estimated that approximately 3,206 (75%) of the 4,293 total reported adult/adolescent AIDS cases, [and approximately 133 (62%) of the 215 adult/adolescent AIDS cases reported in 2001] were in MSM. Likewise, it is estimated that approximately 1,389 (68%) of the 2,053 total reported adult/adolescent HIV cases [and approximately 127 (57%) of the 224 adult/adolescent HIV cases reported in 2001] were in MSM.

Who

- Table 11 shows reported HIV and AIDS cases in MSM by race/ethnicity.
- Of total reported HIV cases in MSM, white men comprise 55.4%, black men 42.8%, and Hispanic men 1.2%.
- White men comprise 61.4% of total reported AIDS cases among MSM, black men 37.4%, and Hispanic men 1.0%.
- Table 12 shows reported HIV cases in MSM by race/ethnicity and age group. Among white MSM, the largest proportion of reported HIV cases (46.4%) were in men 30-39 years of age at the time of initial diagnosis. Among black MSM, the largest proportion of cases (42.4%) were in men 20-29 years of age at the time of diagnosis. Among Hispanics, the largest proportion (46.7%) were in men 30-39 years of age at the time of diagnosis. In addition, 6.5% of HIV cases in black MSM were diagnosed in teenagers (compared to 1.5% in whites).
- Information obtained through interviews with reported MSM HIV and AIDS cases indicates that at least 22% of these men (15% of white men and 34% of black men) have, in addition to having sex with other men, also had sex with females. (Note that the actual percentages may be higher because complete information may not have been obtained on all reported cases.)

Where

- Of the 1,295 total HIV cases reported in MSM, 846 (65.3%) were from St. Louis City, 374 (28.9%) from St. Louis County, and 42 (3.2%) from St. Charles County. The remaining cases were from the other counties in the HIV region (each of these counties reported less than 20 cases).
- Table 13 shows reported HIV cases in MSM by race/ethnicity and geographic area. Of total MSM cases reported from St. Louis City and St. Louis County, black men make up 47.2% and 40.9%, respectively.

Trends

- Figure 22 shows reported HIV cases in MSM by race/ethnicity and year of diagnosis for the period 1990-2001. During this period, the annual number of diagnosed HIV cases in MSM generally decreased through the year 2000. In 2001, approximately 140 new HIV cases are estimated to have been diagnosed, an increase of about 25 cases from the preceding year, and which included increases in diagnosed cases in both white and black MSM.
- As indicated in Table 2 (on page 103), a lower proportion of cumulative HIV cases (67.7%), compared to cumulative AIDS cases (74.7%), appear to be MSM, providing evidence that among more recently infected persons a smaller proportion are MSM.

HIV Disease Epi Profile Summary: St. Louis HIV Region

Table 11. Reported HIV and AIDS Cases in Men Who Have Sex With Men by Race/Ethnicity, St. Louis HIV Region, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Case	%	Case	%	Case	%	Case	%
White	45	(53.6%)	718	(55.4%)	53	(44.9%)	1,940	(61.4%)
Black	33	(39.3%)	554	(42.8%)	63	(53.4%)	1,182	(37.4%)
Hispanic	3	(3.6%)	15	(1.2%)	0	(0.0%)	33	(1.0%)
Other/Unknown	3	(3.6%)	8	(0.6%)	2	(1.7%)	7	(0.2%)
St. Louis HIV Region Total	84	(100.0%)	1,295	(100.0%)	118	(100.0%)	3,162	(100.0%)

*HIV cases reported during 2000 which remained HIV cases at the end of that year.

Table 12. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Age Group, St. Louis HIV Region, Cumulative Through December 2001

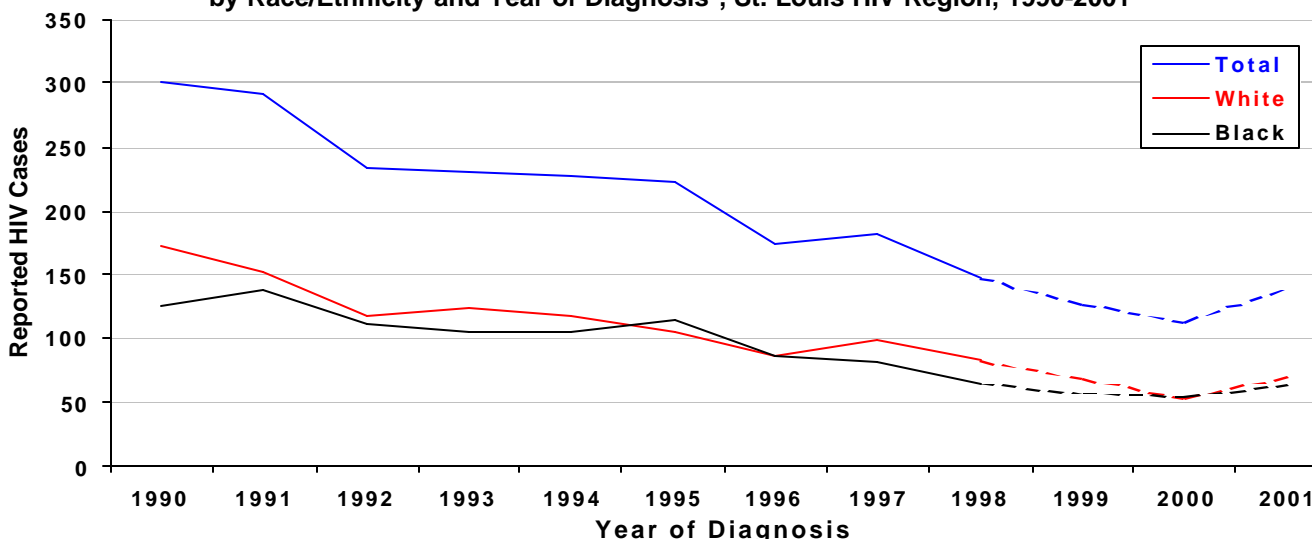
Age Group	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
13-19	9	(1.3%)	36	(6.5%)	1	(6.7%)	46	(3.6%)
20-29	211	(29.4%)	235	(42.4%)	5	(33.3%)	453	(35.0%)
30-39	333	(46.4%)	183	(33.0%)	7	(46.7%)	526	(40.6%)
40-49	129	(18.0%)	77	(13.9%)	1	(6.7%)	210	(16.2%)
50+	36	(5.0%)	23	(4.2%)	1	(6.7%)	60	(4.6%)
St. Louis HIV Region Total	718	(100.0%)	554	(100.0%)	15	(100.0%)	1,295	(100.0%)

Table 13. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Geographic Area, St. Louis HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
St. Louis City	436	(51.5%)	399	(47.2%)	6	(0.7%)	846	(100.0%)
St. Louis County	211	(56.4%)	153	(40.9%)	8	(2.1%)	374	(100.0%)
St. Charles County	39	(92.9%)	1	(2.4%)	1	(2.4%)	42	(100.0%)
Jefferson County	17	(94.4%)	1	(5.6%)	0	(0.0%)	18	(100.0%)
Franklin County	12	(100.0%)	0	(0.0%)	0	(0.0%)	12	(100.0%)
Remaining Counties	3	(100.0%)	0	(0.0%)	0	(0.0%)	3	(100.0%)
St. Louis HIV Region Total	718	(55.4%)	554	(42.8%)	15	(1.2%)	1,295	(100.0%)

NOTE: Row percentages are shown.

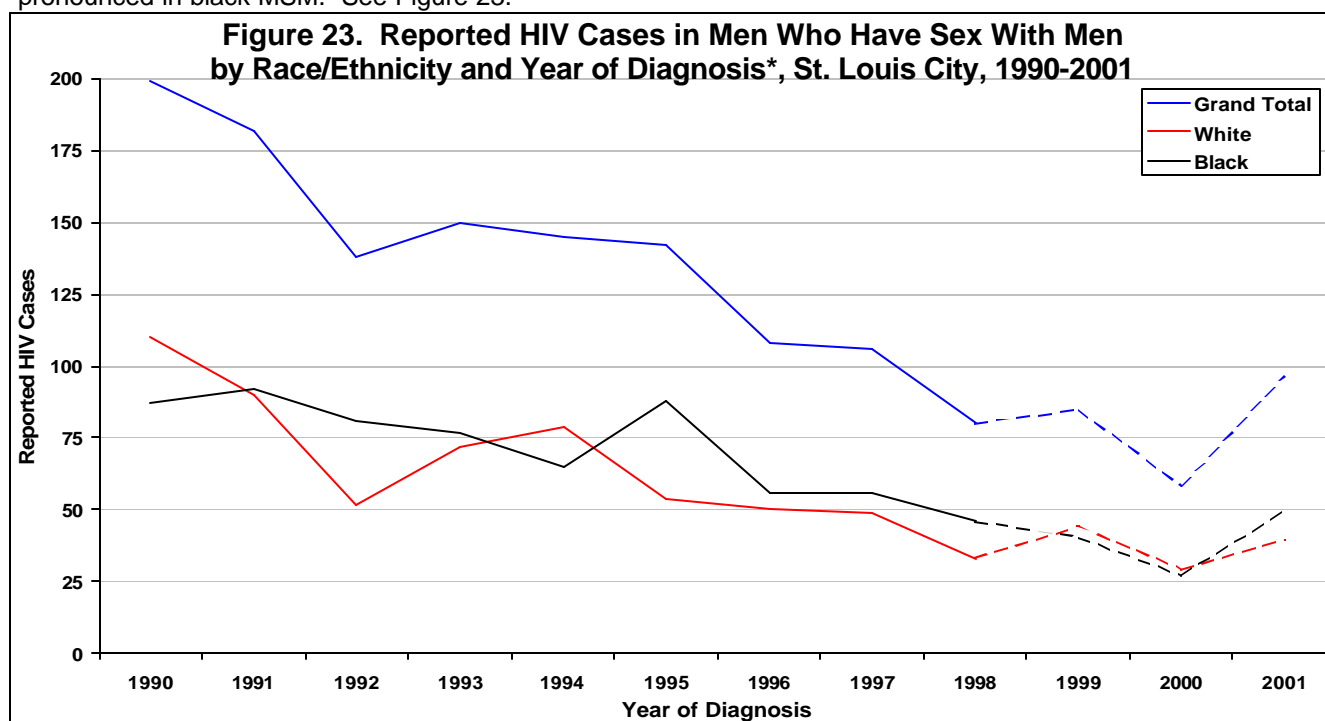
Figure 22. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Year of Diagnosis*, St. Louis HIV Region, 1990-2001



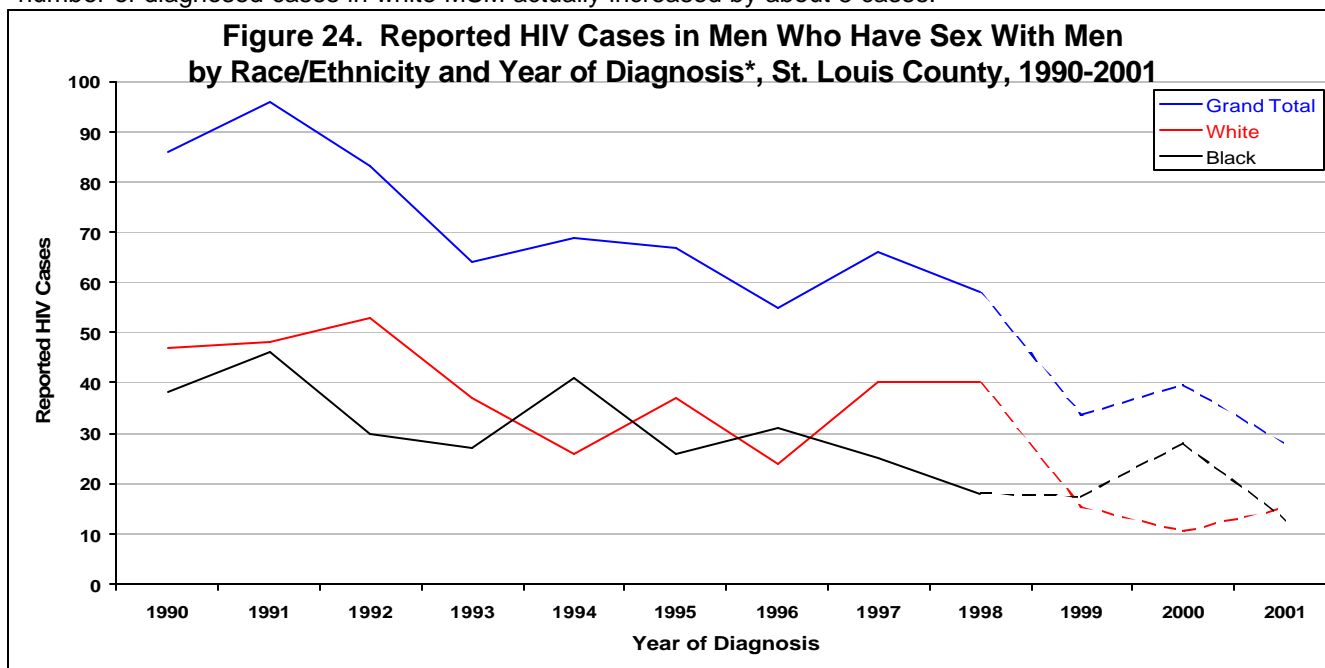
*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: St. Louis HIV Region

- For diagnosed HIV cases in MSM in St. Louis City, the trends seen in recent years are similar to those for the region as a whole. The annual number of diagnosed cases generally decreased through the year 2000. In 2001, approximately 95 new HIV cases in MSM are estimated to have been diagnosed, an increase of about 40 cases from the preceding year. Increases in diagnosed MSM HIV cases were seen in both white and black MSM, but were somewhat more pronounced in black MSM. See Figure 23.



- In St. Louis County, the annual number of diagnosed HIV cases in MSM decreased from 1991 to 1993, remained plateaued through 1997, and then generally decreased through the year 2001. In 2001, approximately 30 new HIV cases in MSM are estimated to have been diagnosed, a decrease of about 10 cases from the preceding year. However, as shown in Figure 24, the decrease in diagnosed cases from 2000 to 2001 only occurred in black MSM; the number of diagnosed cases in white MSM actually increased by about 5 cases.



HIV Disease Epi Profile Summary: St. Louis HIV Region

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Men Who Have Sex With Men and Inject Drugs (MSM/IDU)

Magnitude of the Problem

- From 1982 through 2001, a total of 335 HIV Disease cases in MSM/IDUs have been reported in St. Louis HIV Region residents (these cases make up 5.3% of all reported adult/adolescent HIV Disease cases in the region). Of these 335 HIV Disease cases, 264 (78.8%) are AIDS cases and 71 (21.2%) are HIV cases.
- In 2001, of the 215 adult/adolescent AIDS cases reported, 7 (3.3%) have, to date, been identified as MSM/IDUs. In 2001, of the 224 adult/adolescent HIV cases reported none have, to date, been identified as MSM/IDUs.
- These numbers, however, do not indicate the full extent of MSM/IDU involvement since for 65 adult/adolescent AIDS cases, and 153 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 103). Here it is estimated that approximately 265 (6.2%) of the 4,293 total reported adult/adolescent AIDS cases were in MSM/IDUs. Likewise, it is estimated that approximately 75 (3.5%) of the 2,053 total reported adult/adolescent HIV cases were in MSM/IDUs.

Who

- Table 14 shows reported HIV and AIDS cases in MSM/IDUs by race/ethnicity.
- Of the 71 total reported HIV cases among MSM/IDUs, white men comprise 46.5%, and black men make up 50.7%.
- White men comprise 49.6% of the 264 total reported AIDS cases among MSM/IDUs, and black men make up 48.1%.
- Table 15 shows reported HIV cases in MSM/IDUs by race/ethnicity and age group. Among both white and black MSM/IDUs, the largest proportion of reported HIV cases (42.4% and 38.9%, respectively) were in men 30-39 years of age at the time of initial diagnosis.
- Information obtained through interviews with reported MSM/IDU HIV and AIDS cases indicates that at least 45% of these men (39% of white men and 51% of black men) have, in addition to having sex with other men, also had sex with females. (Note that these percentages may actually be higher because complete information may not have been obtained on all reported cases.)

Where

- Of the 71 total HIV cases reported in MSM/IDUs, 54 (76.1%) were from St. Louis City and 13 (18.3%) from St. Louis County. The remaining cases were from 2 other counties of the HIV region (each of these counties reported <4 cases).
- Table 16 shows reported HIV cases in MSM/IDUs by race/ethnicity and geographic area. Of total MSM/IDU cases reported from St. Louis City and St. Louis County, black men made up 57.4% and 30.8%, respectively.

Trends

- The annual number of diagnosed HIV cases in MSM/IDUs has generally been decreasing since the early 1990s. During each of the past three years, approximately 3-4 HIV cases in MSM/IDUs have been diagnosed. (See Figure 9 on page 110.)

HIV Disease Epi Profile Summary: St. Louis HIV Region

Table 14. Reported HIV and AIDS Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity, St. Louis HIV Region, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Case	%	Case	%	Case	%	Case	%
White	0	(0.0%)	33	(46.5%)	3	(42.9%)	136	(51.5%)
Black	0	(0.0%)	36	(50.7%)	4	(57.1%)	127	(48.1%)
Hispanic	--	--	1	(1.4%)	--	--	1	(0.4%)
Other/Unknown	--	--	1	(1.4%)	--	--	0	(0.0%)
St. Louis HIV Region Total	0	(0.0%)	71	(100.0%)	7	(100.0%)	264	(100.0%)

*HIV cases reported during 2000 which remained HIV cases at the end of that year.

Table 15. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity and Age Group, St. Louis HIV Region, Cumulative Through December 2001

Age Group	White		Black		Total	
	Cases	%	Cases	%	Cases	%
13–19	2	(6.1%)	3	(8.3%)	5	(7.0%)
20–29	11	(33.3%)	13	(36.1%)	25	(35.2%)
30–39	14	(42.4%)	14	(38.9%)	29	(40.8%)
40–49	6	(18.1%)	5	(13.9%)	11	(15.5%)
50+	0	(0.0%)	1	(2.8%)	1	(1.4%)
St. Louis HIV Region Total	33	(100.0%)	36	(100.0%)	71	(100.0%)

Table 16. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity and Geographic Area, St. Louis HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Total	
	Cases	%	Cases	%	Cases	%
St. Louis City	21	(38.9%)	31	(57.4%)	54	(100.0%)
St. Louis County	9	(69.2%)	4	(30.8%)	13	(100.0%)
St. Charles County	--	--	--	--	3	(100.0%)
Remaining Counties	--	--	--	--	1	(100.0%)
St. Louis HIV Region Total	33	(46.5%)	36	(50.7%)	71	(100.0%)

NOTE: Row percentages are shown.

Injecting Drug Users (IDUs)

Magnitude of the Problem

- From 1982 through 2001, a total of 423 HIV Disease cases in IDUs have been reported in St. Louis HIV Region residents (these cases make up 6.7% of all reported adult/adolescent HIV Disease cases in the region). Of these 423 HIV Disease cases, 293 (69.3%) are AIDS cases and 130 (30.7%) are HIV cases.
- In 2001, of the 215 adult/adolescent AIDS cases reported, 18 (8.4%) have, to date, been identified as IDUs. In 2001, of the 224 adult/adolescent HIV cases reported 9 (4.0%) have, to date, been identified as IDUs.
- These numbers, however, do not quite indicate the full extent of IDUs involvement since for 65 adult/adolescent AIDS cases, and 153 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the “Other/Unknown” exposure category. If these cases were all assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with “Other/Unknown” cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 103). Here it is estimated that approximately 296 (6.9%) of the 4,293 total reported adult/adolescent AIDS cases were in IDUs. Likewise, it is estimated that approximately 136 (6.6%) of the 2,053 total reported adult/adolescent HIV cases were in IDUs.

Who

- Table 17 shows reported HIV and AIDS cases in IDUs by race/ethnicity and gender.
- Black males comprise 45.4% of the 130 total reported HIV cases among IDUs; black females make up 23.1%; white males 17.7%; and white females 13.1%.
- Black males comprise 40.3% of the 293 total reported AIDS cases among IDUs; black females make up 27.3%; white males 18.8%; white females 10.9%; Hispanic males, 2.0% (6 cases); and Hispanic females, 0.7% (2 cases).
- Table 18 shows reported HIV cases in IDUs by race/ethnicity, gender, and age group. Among white male, black male, white female, and black female IDUs, the largest proportion of reported HIV cases (65.2%, 50.8%, 41.2%, and 53.3%, respectively) were in persons 30-39 years of age at the time of initial diagnosis.

Where

- Of the 130 total HIV cases reported in IDUs, 90 (69.2%) were from St. Louis City, 23 (17.7%) from St. Louis County, and 8 (6.2%) from St. Charles County. The remaining 9 cases were from Jefferson, Franklin, and Lincoln Counties.
- Table 19 shows reported HIV cases in IDUs by race/ethnicity and geographic area. Of total IDU HIV cases reported from St. Louis City and St. Louis County, blacks made up 82.2% and 65.2%, respectively.

Trends

- The annual number of diagnosed HIV cases in IDUs generally decreased from 1993 to 1998, increased slightly in 1999, and subsequently remained stable at approximately 11 diagnosed cases in both 2000 and 2001. (See Figure 9 on page 110.)

[†] Each male IDU case denied any homosexual contact; if such contact were reported, the case would have been placed in the men who have sex with men and inject drugs [MSM/IDU] exposure category.

HIV Disease Epi Profile Summary: St. Louis HIV Region

Table 17. Reported HIV and AIDS Cases in Injecting Drug Users by Race/Ethnicity and Gender, St. Louis HIV Region, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Case	%	Case	%	Case	%	Case	%
White Male	4	(44.4%)	23	(17.7%)	5	(27.8%)	55	(18.8%)
Black Male	1	(11.1%)	59	(45.4%)	6	(33.3%)	118	(40.3%)
Hispanic Male	--	--	0	(0.0%)	--	--	6	(2.0%)
White Female	1	(11.1%)	17	(13.1%)	2	(11.1%)	32	(10.9%)
Black Female	3	(33.3%)	30	(23.1%)	5	(27.8%)	80	(27.3%)
Hispanic Female	--	--	0	(0.0%)	--	--	2	(0.7%)
St. Louis HIV Region Total	9	(100.0%)	130	(100.0%)	18	(100.0%)	293	(100.0%)

*HIV cases reported during 2000 which remained HIV cases at the end of that year.

Table 18. Reported HIV Cases in Injecting Drug Users by Race/Ethnicity, Gender, and Age Group, St. Louis HIV Region, Cumulative Through December 2001

Age Group	White Males		Black Males		White Females		Black Females		Total	
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
13-19	1	(4.3%)	1	(1.7%)	3	(17.6%)	0	(0.0%)	5	(3.8%)
20-29	6	(26.1%)	12	(20.3%)	5	(29.4%)	5	(16.7%)	29	(22.3%)
30-39	15	(65.2%)	30	(50.8%)	7	(41.2%)	16	(53.3%)	68	(52.3%)
40-49	1	(4.3%)	11	(18.6%)	2	(11.8%)	5	(16.7%)	19	(14.6%)
50+	0	(0.0%)	5	(8.5%)	0	(0.0%)	4	(13.3%)	9	(6.9%)
St. Louis HIV Region Total	23	(100.0%)	59	(100.0%)	17	(100.0%)	30	(100.0%)	130	(100.0%)

Table 19. Reported HIV Cases in Injecting Drug Users by Race/Ethnicity and Geographic Area, St. Louis HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Total	
	Cases	%	Cases	%	Cases	%
St. Louis City	16	(17.8%)	74	(82.2%)	90	(100.0%)
St. Louis County	7	(30.4%)	15	(65.2%)	23	(100.0%)
St. Charles County	8	(100.0%)	0	(0.0%)	8	(100.0%)
Franklin County	5	(100.0%)	0	(0.0%)	5	(100.0%)
Jefferson County	3	(100.0%)	0	(0.0%)	3	(100.0%)
St. Louis HIV Region Total	40	(30.8%)	89	(68.5%)	130	(100.0%)

NOTE: Row percentages are shown.

HIV Disease Epi Profile Summary: St. Louis HIV Region

Heterosexual Contacts

Magnitude of the Problem

- From 1982 through 2001, a total of 800 HIV Disease cases in heterosexual contacts have been reported in St. Louis HIV Region residents (these cases make up 12.6% of all reported adult/adolescent HIV Disease cases in the region). Of these 800 HIV Disease cases, 413 (51.6%) are AIDS cases and 387 (48.4%) are HIV cases.
- In 2001, of the 215 adult/adolescent AIDS cases reported, 45 (20.9%) have, to date, been identified as being in heterosexual contacts. In 2001, of the 224 HIV cases reported 55 (24.6%) have, to date, been identified as being in heterosexual contacts.
- These numbers, however, do not indicate the full extent of heterosexual contact involvement since for 65 adult/adolescent AIDS cases, and 153 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the “Other/Unknown” exposure category. If these cases were all assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with “Other/Unknown” cases whose exposure category was determined following investigation, the result would be that seen in Table 2 on page 103. Here it is estimated that approximately 430 (10.0%) of the 4,293 total reported adult/adolescent AIDS cases [and approximately 51 (23.7%) of the 215 adult/adolescent AIDS cases reported in 2001] were in heterosexual contacts. Likewise, it is estimated that approximately 436 (21.2%) of the 2,053 total reported adult/adolescent HIV cases [and approximately 83 (37.1%) of the 224 adult/adolescent HIV cases reported in 2001] were in heterosexual contacts.

Who

- Table 20 shows reported HIV and AIDS cases in heterosexual contacts by race/ethnicity and gender.
- Black females comprise 52.8% of the 413 total reported AIDS cases among heterosexual contacts; white females make up 19.1%; black males 17.2%; and white males 9.4%. Three heterosexual contact AIDS cases have been reported in Hispanics.
- Black females comprise 59.7% of the 387 total reported HIV cases among heterosexual contacts; black males make up 18.1%; white females 15.8%; and white males 4.9%. Two heterosexual contact HIV cases have been reported in Hispanics.
- Table 21 shows reported HIV cases in heterosexual contacts by race/ethnicity, gender, and age group. Among white female and black female heterosexual contacts, the largest proportion of reported HIV cases (44.3% and 39.8%, respectively) were in women 20-29 years of age at the time of initial diagnosis. Among black male and white male heterosexual contacts, the largest proportion of reported HIV cases (38.6% and 36.8%) were in men 30-39 years of age at the time of diagnosis.

Where

- Of the 387 total HIV cases reported in heterosexual contacts, 228 (58.9%) were from St. Louis City, 134 (34.6%) from St. Louis County, 11 (2.8%) from Jefferson County, and 10 (2.6%) from St. Charles County. Four other cases were reported from the remaining counties in the region.
- Table 22 shows reported HIV cases in heterosexual contacts by race/ethnicity and geographic area. Of total heterosexual contact cases reported from St. Louis City and St. Louis County, blacks make up 89.0% and 70.1%, respectively.

Trends

- The annual number of diagnosed HIV cases in heterosexual contacts has generally been increasing since 1994, although it appeared to remain stable the past two years, with approximately 85 cases being diagnosed in both 2000 and 2001. The annual number of diagnosed HIV cases in whites has remained generally plateaued since the early 1990s. In contrast, the annual number of diagnosed cases in blacks has generally been increasing, although a slight decrease may have occurred from 2000 to 2001. (See Figure 25.)
- Figure 26 shows reported HIV cases by race/ethnicity, gender, and year of diagnosis. Diagnosed cases in black females have shown a general upward trend since the early 1990s. The annual number of diagnosed HIV cases in black males increased each year from 1997 through 2000, but then apparently decreased in 2001. Numbers of diagnosed cases in white males and white females have been smaller, and have not shown noticable upward or downward trends.
- As indicated in Table 2 (on page 103) a higher proportion of cumulative HIV cases (19.2%), compared to cumulative AIDS cases (10.0%), appear to be heterosexual contacts, providing evidence that among more recently infected persons a larger proportion are heterosexual contacts.

HIV Disease Epi Profile Summary: St. Louis HIV Region

Table 20. Reported HIV and AIDS Cases in Heterosexual Contacts by Race/Ethnicity and Gender, St. Louis HIV Region, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Case	%	Case	%	Case	%	Case	%
White Male	5	(9.1%)	19	(4.9%)	2	(4.4%)	39	(9.4%)
Black Male	11	(20.0%)	70	(18.1%)	10	(22.2%)	71	(17.2%)
White Female	9	(16.4%)	61	(15.8%)	8	(17.8%)	79	(19.1%)
Black Female	29	(52.8%)	231	(50.7%)	25	(55.6%)	218	(52.8%)
St. Louis HIV Region Total	55	(100.0%)	387	(100.0%)	45	(100.0%)	413	(100.0%)

*HIV cases reported during 2000 which remained HIV cases at the end of that year.

Table 21. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity, Gender, and Age Group, St. Louis HIV Region, Cumulative Through December 2001

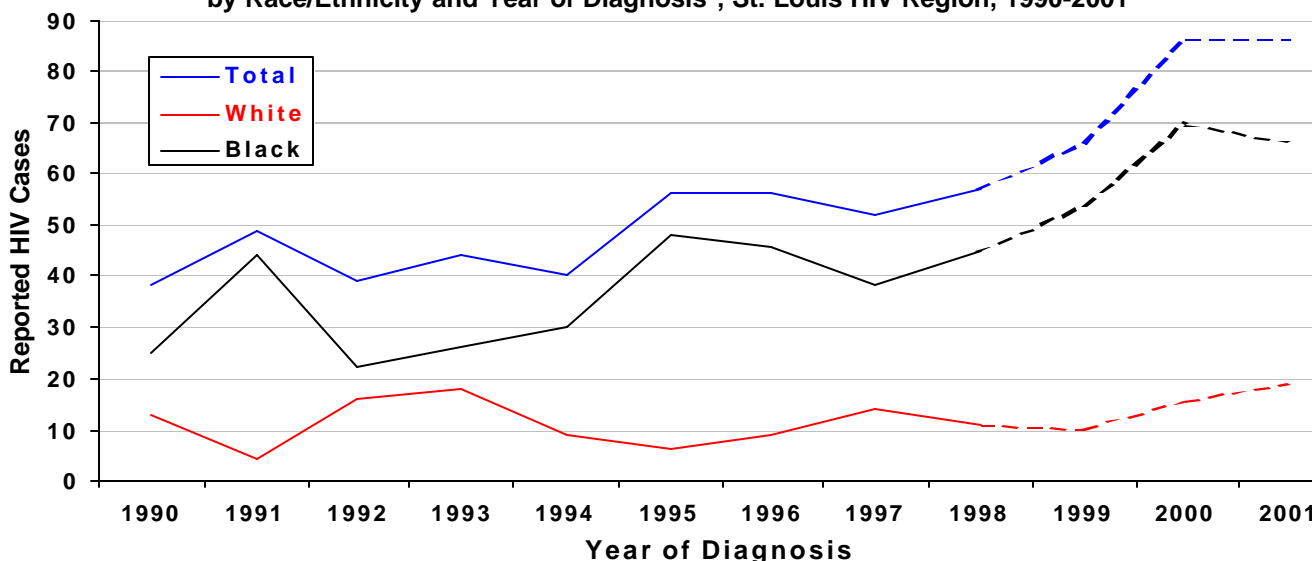
Age Group	White Males		Black Males		White Females		Black Females		Total	
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
13-19	0	(0.0%)	3	(4.3%)	8	(13.1%)	41	(17.7%)	52	(13.4%)
20-29	5	(26.3%)	24	(34.3%)	27	(44.3%)	92	(39.8%)	150	(38.8%)
30-39	7	(36.8%)	27	(38.6%)	12	(19.7%)	68	(29.4%)	116	(30.0%)
40-49	4	(21.1%)	10	(14.3%)	8	(13.1%)	21	(9.1%)	44	(11.4%)
50+	3	(15.8%)	6	(8.6%)	6	(9.8%)	9	(3.9%)	25	(6.5%)
St. Louis Region Total	19	(100.0%)	70	(100.0%)	61	(100.0%)	231	(100.0%)	387	(100.0%)

Table 22. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Geographic Area, St. Louis HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Total	
	Cases	%	Cases	%	Cases	%
St. Louis City	24	(10.5%)	203	(89.0%)	228	(100.0%)
St. Louis County	35	(26.1%)	94	(70.1%)	134	(100.0%)
Jefferson County	8	(72.7%)	3	(27.3%)	11	(100.0%)
St. Charles County	10	(100.0%)	0	(0.0%)	10	(100.0%)
Remaining Counties	--	--	--	(0.0%)	4	(100.0%)
St. Louis HIV Region Total	80	(20.7%)	301	(77.8%)	387	(100.0%)

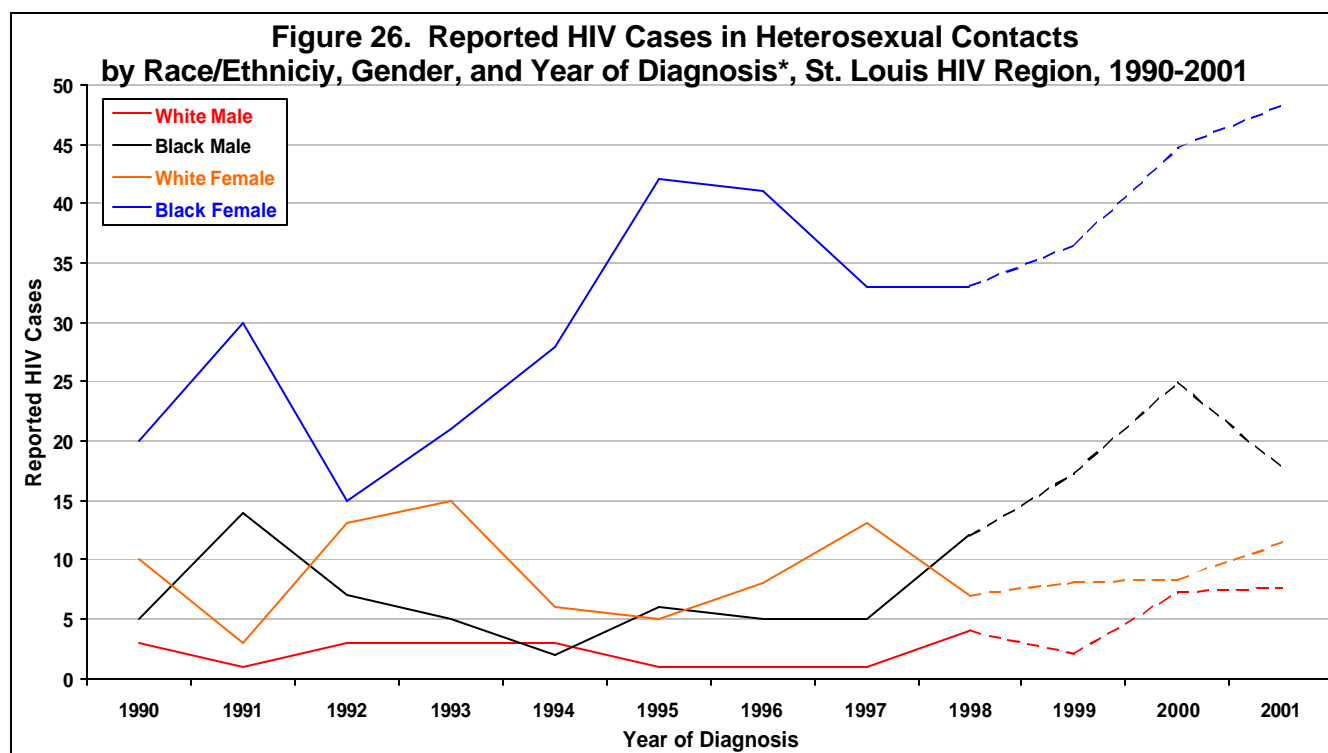
NOTE: Row percentages are shown.

Figure 25. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Year of Diagnosis*, St. Louis HIV Region, 1990-2001



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: St. Louis HIV Region



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: St. Louis HIV Region

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STD Epi Profile Summary: St. Louis HIV Region

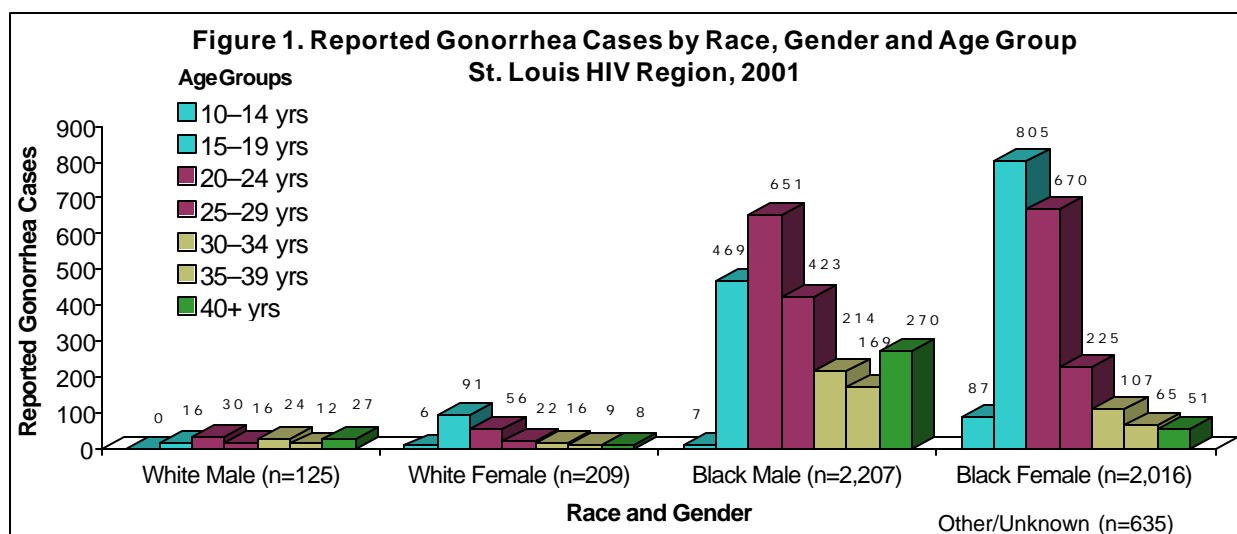
Gonorrhea

Magnitude of the Problem

- During 2001, 5,192 cases of gonorrhea were reported in the St. Louis HIV Region; the corresponding rate* was 264.2 cases per 100,000 population. Because of underdiagnosis and underreporting, the actual number of persons infected with *Neisseria gonorrhoeae* was undoubtedly much higher.

Who

- Of the 5,192 gonorrhea cases reported in 2001, 2,535 (48.8%) were in males and 2,657 (51.2%) were in females. Among whites, a higher proportion of cases were reported in females (62.6%) than in males (37.4%). Among blacks, a higher proportion of cases were reported in males (52.3%) than in females (47.7%).
- Of the 5,192 gonorrhea cases reported in 2001, 334 (6.5%) were in whites and 4,223 (81.3%) were in blacks. Twenty-eight (0.5%) cases were in another racial group, and for 607 (11.7%) cases, race was unknown.
- The rate* of reported cases in blacks (1,194.6) was about 56 times the rate* in whites (21.5).
- Table 1 on page 131 shows the numbers and rates of reported gonorrhea cases by race.
- Of the 5,192 gonorrhea cases reported in 2001, 1,718 (33.1%) were in teenagers. Teenagers made up 882 (43.8%) of the 2,016 black female cases, 96 (45.9%) of the 209 white female cases, 475 (21.5%) of the 2,207 black male cases, and 16 (12.8%) of the 125 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 5,192 gonorrhea cases reported, 3,185 (61.3%) were from St. Louis City, 1,847 (35.6%) were from St. Louis County, and 78 (1.5%) were from St. Charles County. The remaining counties in the region each had from 3-45 cases reported. Cases were reported from all of the region's counties. Table 2 shows the number and percentage of cases reported from each county. Figure 2 is a map showing reported cases by zip code area for St. Louis City and St. Louis County.
- The highest rate* of reported gonorrhea cases in 2001 was in St. Louis City (953.7). Table 2 shows rates of reported cases for the region's counties. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported gonorrhea cases by race from 1992-2001. The 5,192 gonorrhea cases reported in 2001 represented a 9.8% increase from the 4,727 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: St. Louis HIV Region

Table 1. Reported Gonorrhea Cases and Rates by Race, St. Louis HIV Region, 2001

	Cases	%	Rate*
Whites	334	6.5%	21.5
Blacks	4,223	81.3%	1,194.6
Other/Unknown	635	16.8%	-
Total Cases	5,192	100.0%	264.2

Table 2. Reported Gonorrhea Cases and Rates by County St. Louis HIV Region, 2001

	Cases	%	Rate*
St. Louis City	3,185	61.3%	953.7
St. Louis County	1,847	35.6%	185.4
St. Charles	78	1.5%	27.8
Jefferson	45	0.9%	22.7
Franklin	23	0.4%	24.7
Lincoln	11	0.2%	29.2
Warren	3	0.1%	11.8
Total Cases	5,192	100.0%	264.2

*Per 100,000 population

Figure 2. Reported Gonorrhea Cases by Zip Code Area St. Louis City and St. Louis County, 2001

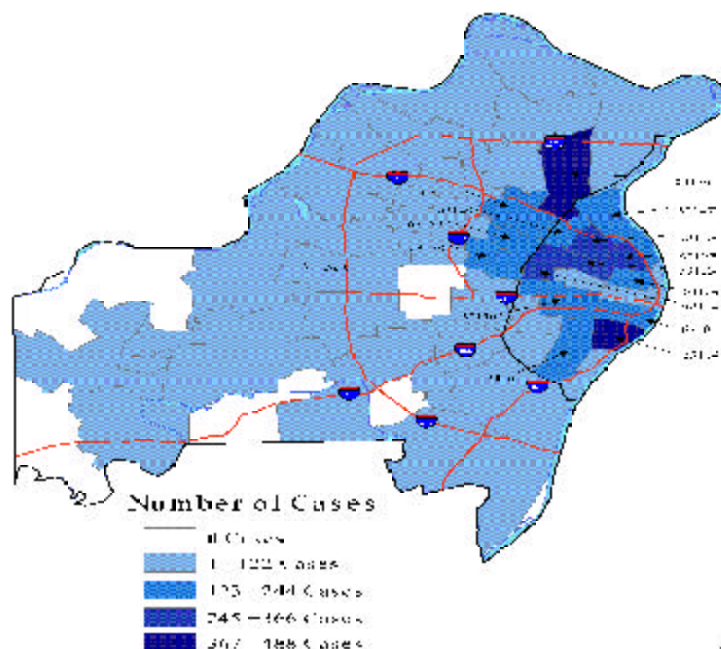


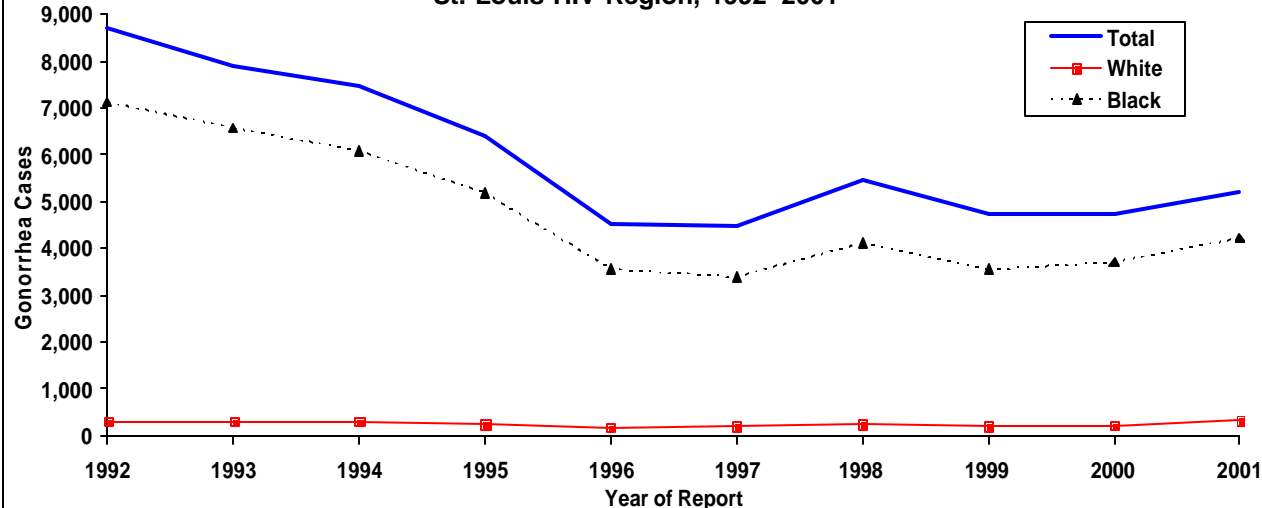
Table 3. Reported Gonorrhea Cases and Rates by Race and County, St. Louis HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
St. Louis City	3,185	100.0%	953.7	132	4.1%	89.7	2,707	85.0%	1535.8
St. Louis County	1,847	100.0%	185.4	120	6.5%	15.1	1,484	80.3%	900.6
St. Charles County	78	100.0%	27.8	37	47.4%	14.0	19	24.4%	240.6
Jefferson County	45	100.0%	22.7	19	42.2%	9.8	9	20.0%	527.2
Franklin County	23	100.0%	24.7	15	65.2%	16.5	3	13.0%	276.2
Lincoln County	11	100.0%	29.2	9	81.8%	24.9	1	9.1%	104.3
Warren County	3	100.0%	11.8	2	66.7%	8.3	0	0.0%	0.0
St. Louis HIV Region	5,192	100.0%	264.2	334	6.4%	21.5	4,223	81.3%	1194.6

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

Figure 3. Reported Gonorrhea Cases by Race and Year of Report St. Louis HIV Region, 1992–2001



STD Epi Profile Summary: St. Louis HIV Region

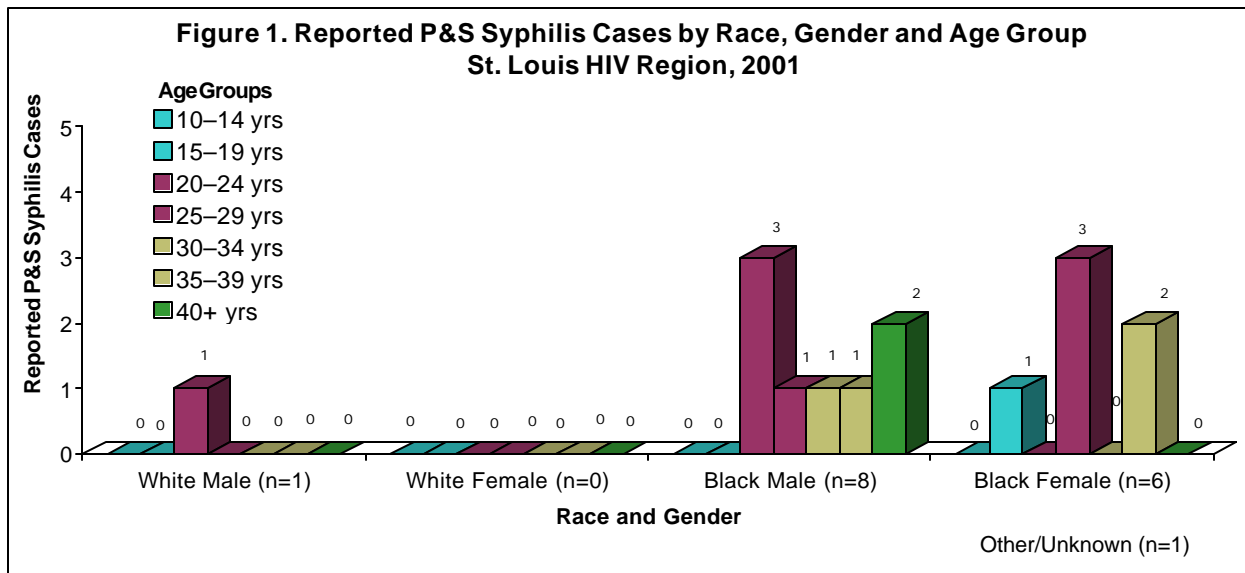
Primary and Secondary Syphilis

Magnitude of the Problem

- During 2001, 16 cases of primary and secondary (P&S) syphilis were reported in the St. Louis HIV Region; the corresponding rate* was 0.8 cases per 100,000 population.

Who

- Of the 16 P&S cases reported in 2001, 10 (62.5%) were in males and 6 (37.5%) were in females. Among whites, one male case was reported.
- Of the 16 primary and secondary syphilis cases reported in 2001, 1 (6.3%) was white and 14 (87.5%) were black. For 1 (6.3%) case, race was unknown.
- The rate* of reported cases in blacks (4.0) was about 40 times the rate* in whites (0.1).
- Table 1 on page 133 shows the numbers and rates of reported primary and secondary syphilis cases by race.
- Of the 16 primary and secondary syphilis cases reported in 2001, 1 (6.3%) was in a teenager. Teenagers made up 1 (16.7%) of the 6 black female cases, no black male or white male cases were in teenagers.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 16 primary and secondary syphilis cases reported, 15 (93.8%) were from St. Louis City, and 1 (6.3%) was from St. Louis County. Table 2 shows the number and percentage of cases reported from each county. Figure 2 is a map showing reported cases by zip code area for St. Louis City and St. Louis County.
- The highest rate* of reported primary and secondary syphilis cases in 2001 was in St. Louis City (4.5). Table 2 shows rates of reported cases for the region's counties. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported primary and secondary syphilis cases by race from 1992-2001. The 16 primary and secondary syphilis cases reported in 2001 represented a 33.3% decrease from the 24 cases reported in 2000.
- The 1 primary and secondary syphilis case reported in whites in 2001 represented a 83.3% decrease from the 6 cases reported in 2000. The 14 primary and secondary syphilis cases reported in blacks in 2001 represented a 22.2% decrease from the 18 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: St. Louis HIV Region

Table 1. Reported P&S Syphilis Cases and Rates by Race, St. Louis HIV Region, 2001

	Cases	%	Rate*
Whites	1	6.3%	0.1
Blacks	14	87.5%	4.0
Other/Unknown	1	6.3%	—
Total Cases	16	100.0%	0.8

Table 2. Reported P&S Syphilis Cases and Rates by County St. Louis HIV Region, 2001

	Cases	%	Rate*
St. Louis City	15	93.8%	4.5
St. Louis County	1	6.3%	0.1
Total Cases	16	100.0%	0.8

*Per 100,000 population

Figure 2. Reported P&S Syphilis Cases by Zip Code Area St. Louis City and St. Louis County, 2001

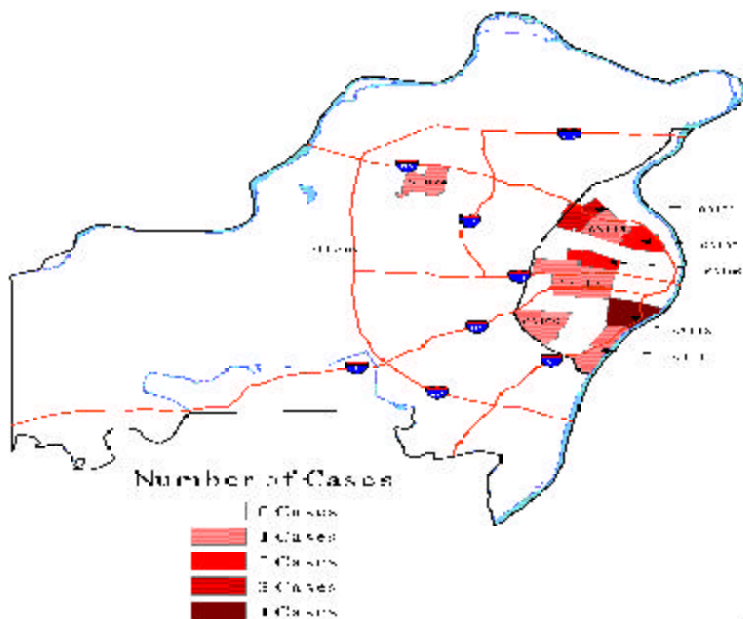


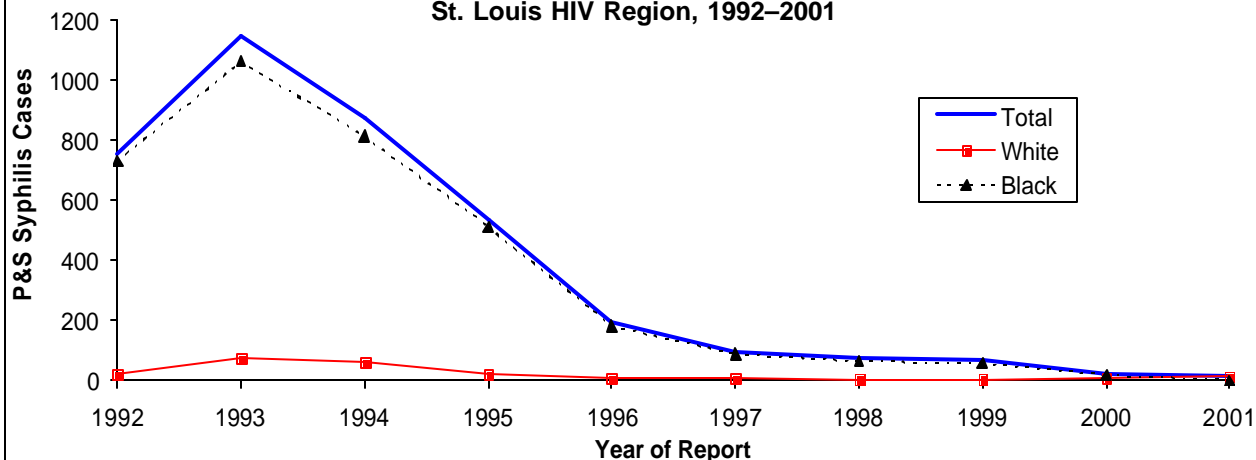
Table 3. Reported Primary & Secondary Syphilis Cases and Rates by Race and County, St. Louis HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
St. Louis City	15	100.0%	4.5	1	6.7%	0.7	14	93.3%	7.9
St. Louis County	1	100.0%	0.1	0	0.0%	15.1	0	0.0%	0.0
St. Louis HIV Region	16	100.0%	0.8	1	6.3%	0.1	14	87.5%	4.0

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

Figure 3. Reported P&S Syphilis Cases by Geographic Area and Year of Report St. Louis HIV Region, 1992–2001



Congenital Syphilis: 5 Congenital Syphilis cases were reported in the St. Louis HIV Region in 2001

STD Epi Profile Summary: St. Louis HIV Region

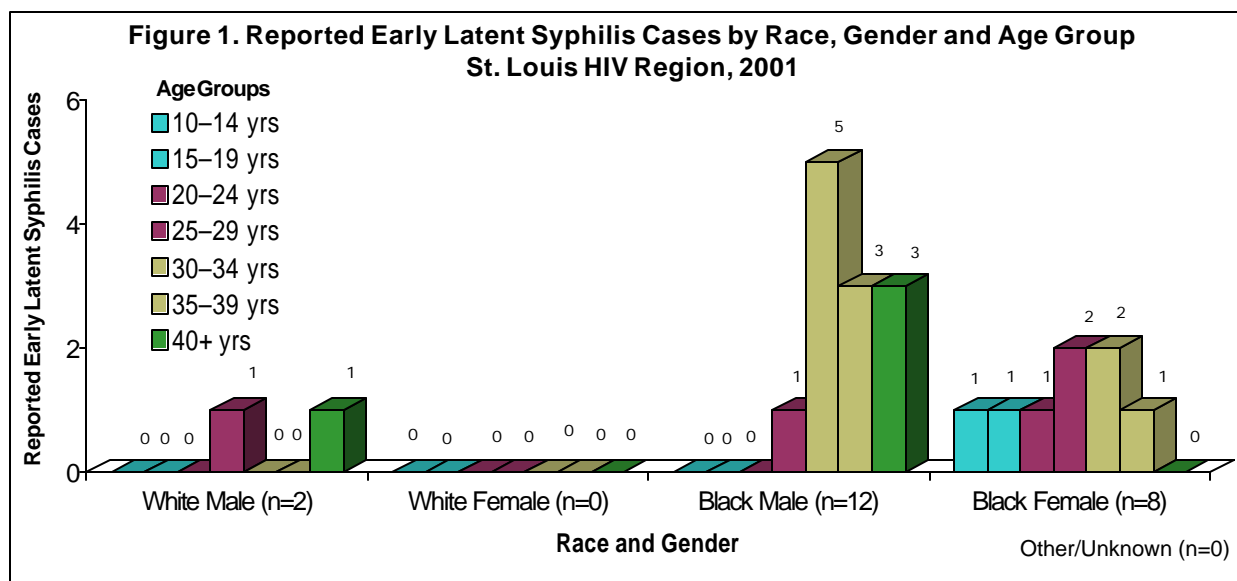
Early Latent Syphilis

Magnitude of the Problem

- During 2001, 22 cases of early latent (duration of less than 1 year) syphilis were reported in the St. Louis HIV Region; the corresponding rate* was 1.1 cases per 100,000 population.

Who

- Of the 22 early latent syphilis cases reported in 2001, 14 (63.6%) were in males and 8 (36.4%) were in females.
- Of the 22 early latent syphilis cases reported in 2001, 2 (9.1%) were in whites and 20 (90.9%) were in blacks.
- The rate* of reported cases in blacks (5.7) was about 57 times the rate* in whites (0.1).
- Table 1 on page 135 shows the numbers and rates of reported early latent syphilis cases by race.
- Of the 22 early latent syphilis cases reported in 2001, 2 (9.1%) were in teenagers. Teenagers made up 2 (25.0%) of the 8 black female cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 22 early latent syphilis cases reported, 15 (68.2%) were from St. Louis City, 6 (27.3%) were from St. Louis County, and 1 (4.5%) was from St. Charles County. Table 2 shows the number and percentage of cases reported from each county. Figure 2 is a map showing reported cases by zip code area for St. Louis City and St. Louis County.
- The highest rate* of reported early latent syphilis cases in 2001 was in St. Louis City (4.5). Table 2 shows rates of reported cases for the region's counties. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported early latent syphilis cases by race from 1992-2001. The 22 early latent syphilis cases reported in 2001 represented a 43.6% decrease from the 39 cases reported in 2000.
- The 2 early latent syphilis cases reported in whites in 2001 represented a 71.4% decrease from the 7 cases reported in 2000. The 20 early latent syphilis cases reported in blacks in 2001 represented a 28.6% decrease from the 28 cases reported in 2000.

Per 100,000 population

STD Epi Profile Summary: St. Louis HIV Region

**Table 1. Reported Early Latent Syphilis Cases and Rates by Race
St. Louis HIV Region, 2001**

	Cases	%	Rate*
Whites	2	9.1%	0.1
Blacks	20	90.9%	5.7
Other/Unknown	0	0.0%	—
Total Cases	22	100.0%	1.1

Table 2. Reported Early Latent Syphilis Cases and Rates by County, St. Louis HIV Region, 2001

	Cases	%	Rate*
St. Louis City	15	68.2%	4.5
St. Louis County	6	27.3%	0.6
St. Charles County	1	4.5%	0.4
Total Cases	22	100.0%	1.1

*Per 100,000 population

**Figure 2. Reported Early Latent Syphilis Cases by Zip Code Area
St. Louis City and County, 2001**

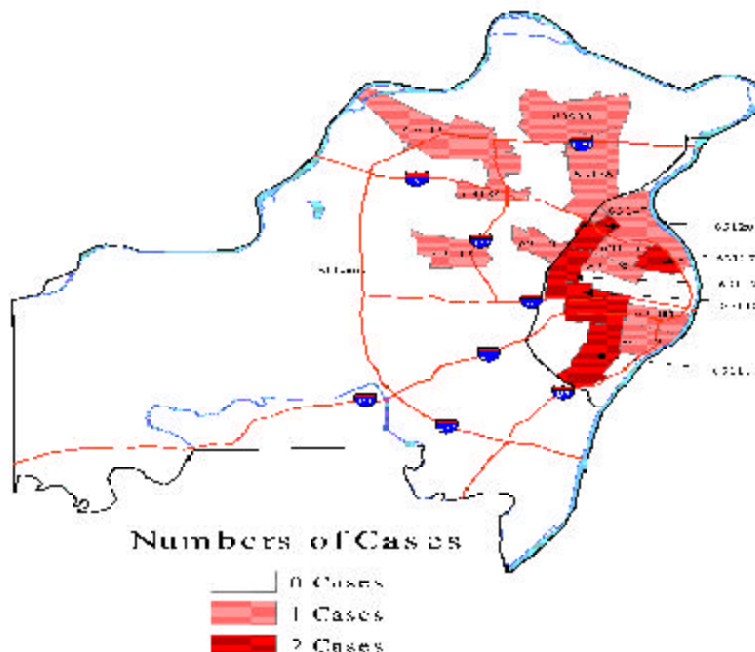


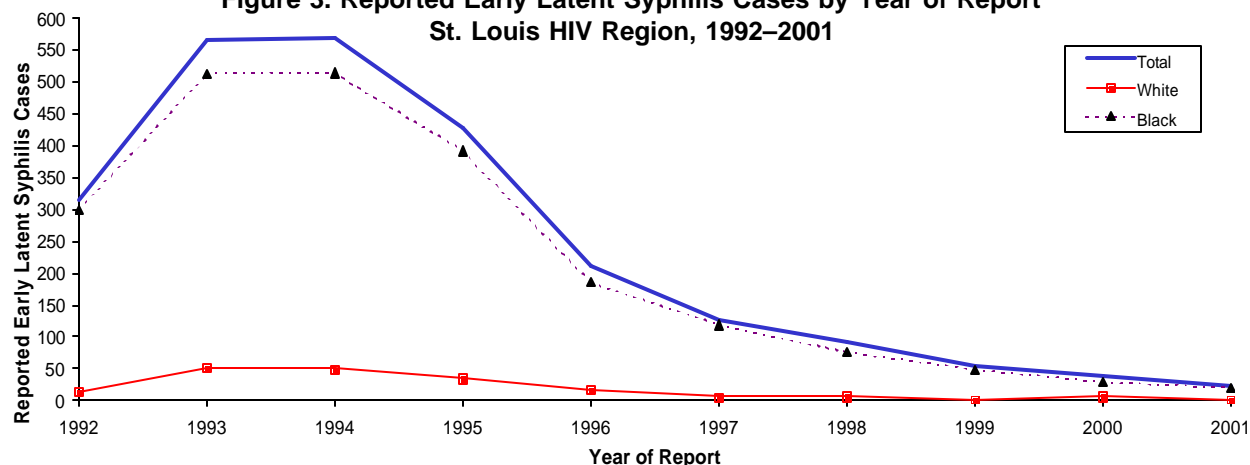
Table 3. Reported Early Latent Syphilis Cases and Rates by Race and County, St. Louis HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
St. Louis City	15	100.0%	4.5	1	6.7%	0.7	14	93.3%	7.9
St. Louis County	6	100.0%	0.6	0	0.0%	0.0	6	100.0%	3.6
St. Charles County	1	100.0%	0.4	1	100.0%	0.4	0	0.0%	0.0
St. Louis HIV Region	22	100.0%	1.1	2	9.1%	0.1	20	90.9%	5.7

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

**Figure 3. Reported Early Latent Syphilis Cases by Year of Report
St. Louis HIV Region, 1992–2001**



STD Epi Profile Summary: St. Louis HIV Region

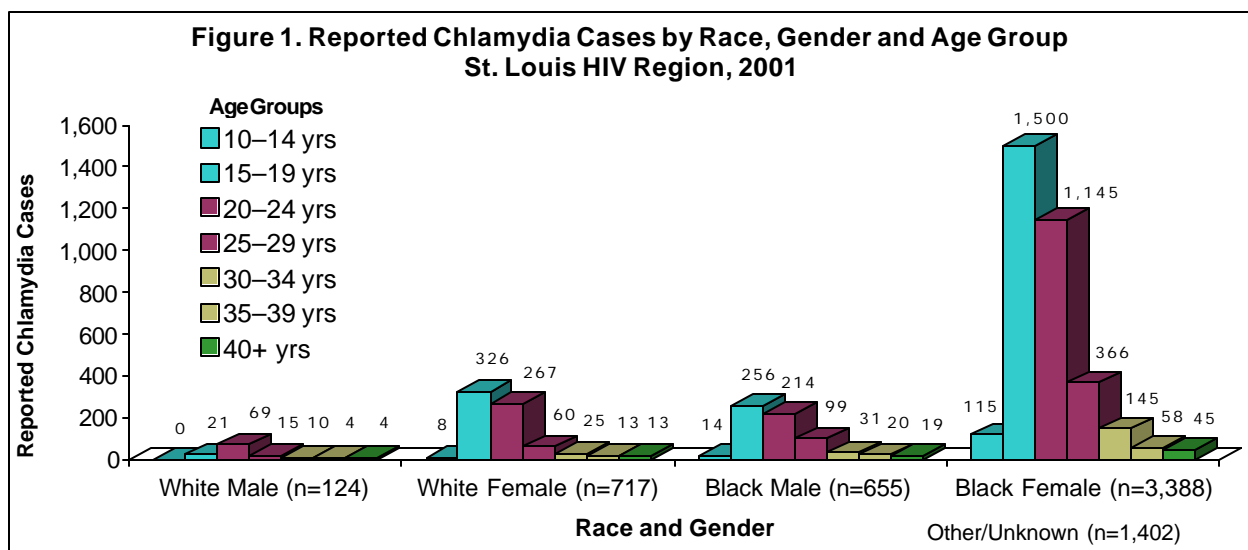
Chlamydia

Magnitude of the Problem

- During 2001, 6,286 cases of chlamydia were reported in the St. Louis HIV Region; the corresponding rate* was 180.3 cases per 100,000 population. Because of underdiagnosis and underreporting, the actual number of persons infected with *Chlamydia trachomatis* was undoubtedly much higher.

Who

- Of the 6,286 chlamydia cases reported in 2001, 961 (15.3%) were in males and 5,325 (84.7%) were in females. This reflects the selective screening of females for chlamydia undertaken by the Missouri Infertility Prevention Project (MIPP). If similar widespread screening of males were also undertaken, it is expected that the number of diagnosed and reported cases in males would be much higher than is currently seen.
- Of the 6,286 chlamydia cases reported in 2001, 841 (13.4%) were in whites and 4,043 (64.3%) were in blacks. One hundred three (1.6%) cases were in other racial groups, and for 1,299 (20.7%) cases, race was unknown.
- The rate* of reported cases in blacks (1,143.7) was about 21 times the rate* in whites (54.1).
- Table 1 on page 137 shows the numbers and rates of reported chlamydia cases by race.
- Of the 6,286 chlamydia cases reported in 2001, 2,832 (45.1%) were in teenagers. Teenagers made up 1,609 (47.5%) of the 3,388 black female cases, 334 (46.6%) of the 717 white female cases, 269 (41.1%) of the 655 black male cases, and 21 (12.1%) of the 124 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 6,286 chlamydia cases reported, 3,195 (50.8%) were from St. Louis City, 2,560 (40.7%) from St. Louis County, 264 (4.2%) from St. Charles County, and 140 (2.2%) from Jefferson County. The remaining counties in the region each had from 17-83 cases reported. Cases were reported from all of the region's counties. Table 2 shows the number and percentage of cases reported from each county. Figure 2 is a map showing cases by zip code area for St. Louis City and St. Louis County.
- The highest rate* of reported chlamydia cases in 2001 was in St. Louis City (956.7). Table 2 shows rates of reported cases for the region's counties. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported chlamydia cases by race from 1992-2001. The 6,286 cases reported in 2001 represented a 9.4% increase from the 5,745 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: St. Louis HIV Region

Table 1. Reported Chlamydia Cases and Rates by Race, St. Louis HIV Region, 2001

	Cases	%	Rate*
Whites	841	13.4%	54.1
Blacks	4,043	64.3%	1143.7
Other/Unknown ..	1,402	22.3%	-
Total Cases	6,286	100.0%	319.9

Table 2. Reported Chlamydia Cases and Rates by County St. Louis HIV Region, 2001

	Cases	%	Rate*
St. Louis City	3,195	50.8%	956.7
St. Louis County ..	2,560	40.7%	257.0
St. Charles	264	4.2%	94.1
Jefferson	140	2.2%	70.7
Franklin	83	1.3%	89.1
Lincoln	27	0.4%	71.6
Warren	17	0.3%	66.8
Total Cases	6,286	100.0%	319.9

*Per 100,000 population

Figure 2. Reported Chlamydia Cases by Zip Code Area St. Louis City and St. Louis County, 2001

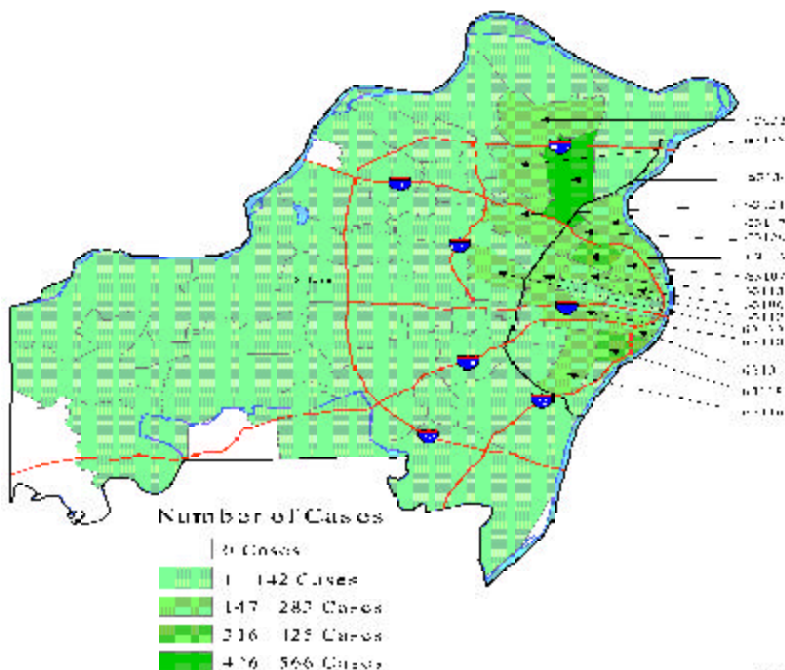


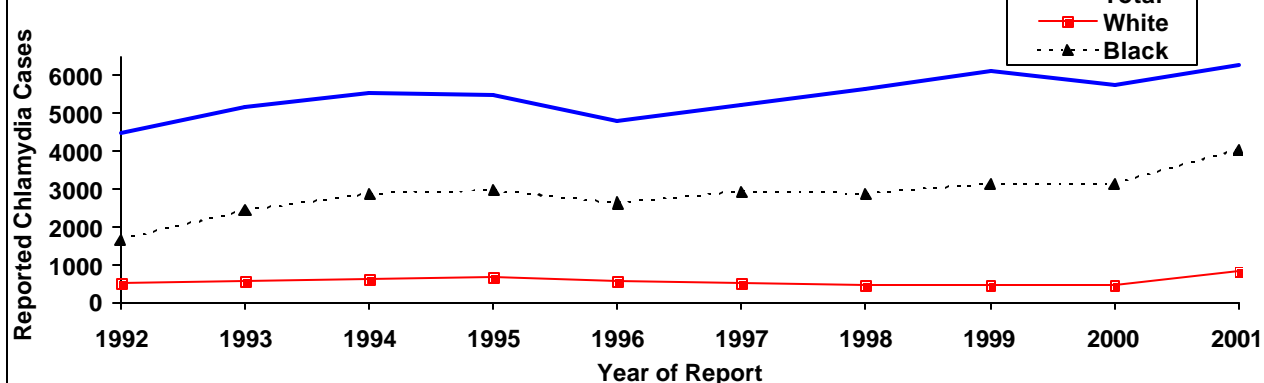
Table 3. Reported Chlamydia Cases and Rates by Race and County, St. Louis HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
St. Louis City	3,195	100.0%	956.7	162	5.1%	110.1	2,333	73.0%	1323.6
St. Louis County	2,560	100.0%	257.0	338	13.2%	42.4	1,662	64.9%	1008.6
St. Charles County	264	100.0%	94.1	149	56.4%	40.8	31	11.7%	392.6
Jefferson County	140	100.0%	70.7	98	70.0%	50.8	9	6.4%	527.2
Franklin County	83	100.0%	89.1	60	72.3%	66.1	5	6.0%	460.4
Lincoln County	27	100.0%	71.6	20	74.1%	55.4	0	0.0%	0.0
Warren County	17	100.0%	66.8	14	82.4%	57.8	3	17.6%	366.3
St. Louis HIV Region	6,286	100.0%	319.9	841	13.4%	54.1	4,043	64.3%	1143.7

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

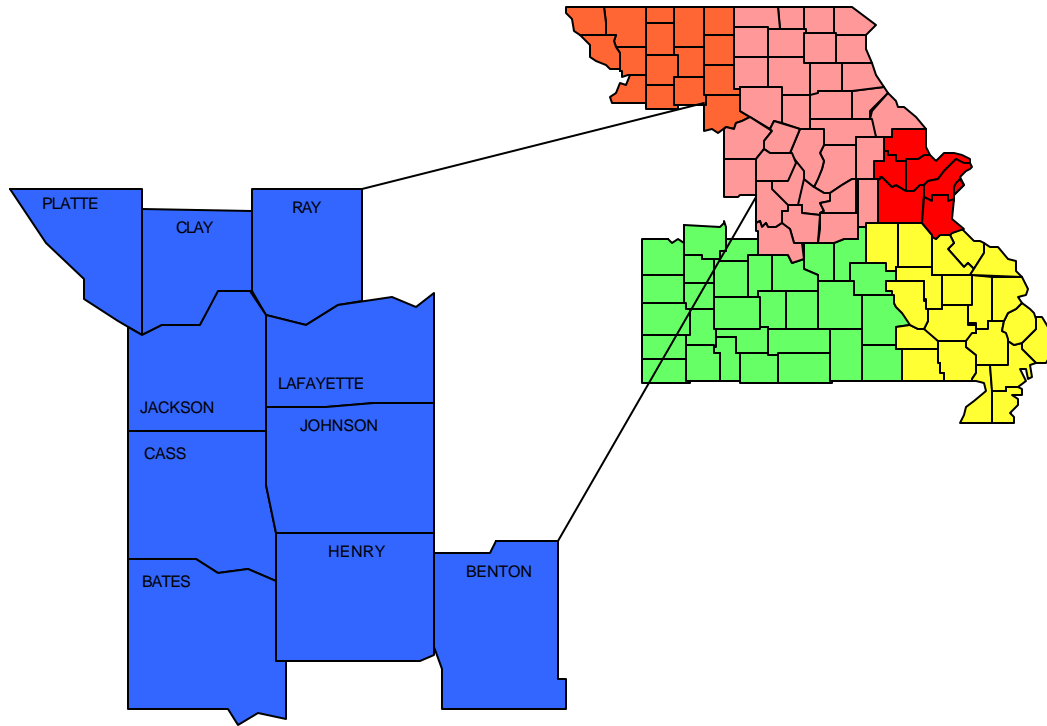
Figure 3. Reported Chlamydia Cases by Race and Year of Report St. Louis HIV Region, 1992–2001



STD Epi Profile Summary: St. Louis HIV Region

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Kansas City HIV Region



1999 Population Estimates for the Kansas City HIV Region

County	White		African American		American Indian		Asian/Pacific Is		Hispanic		Total	
Bates County	15,711	97.8%	137	0.9%	68	0.4%	15	0.1%	130	0.8%	16,061	100.0%
Benton County	17,054	98.3%	26	0.1%	88	0.5%	30	0.2%	147	0.8%	17,345	100.0%
Cass County	79,584	95.8%	1,076	1.3%	422	0.5%	472	0.6%	1,545	1.9%	83,099	100.0%
Clay County	167,906	93.2%	3,645	2.0%	760	0.4%	1,850	1.0%	5,950	3.3%	180,111	100.0%
Henry County	20,627	96.9%	292	1.4%	77	0.4%	74	0.3%	218	1.0%	21,288	100.0%
Jackson County	454,537	69.4%	161,876	24.7%	2,507	0.4%	8,809	1.3%	26,755	4.1%	654,484	100.0%
Johnson County	42,629	88.7%	3,137	6.5%	197	0.4%	938	2.0%	1,152	2.4%	48,053	100.0%
Lafayette County	31,165	95.0%	1,119	3.4%	95	0.3%	107	0.3%	324	1.0%	32,810	100.0%
Platte County	66,195	92.3%	1,782	2.5%	320	0.4%	1,342	1.9%	2,049	2.9%	71,688	100.0%
Ray County	23,020	96.9%	394	1.7%	104	0.4%	52	0.2%	189	0.8%	23,759	100.0%
Region Totals	918,428	80.0%	173,484	15.1%	4,638	0.4%	13,689	1.2%	38,459	3.3%	1,148,698	100.0%

Source: U.S. Census Bureau

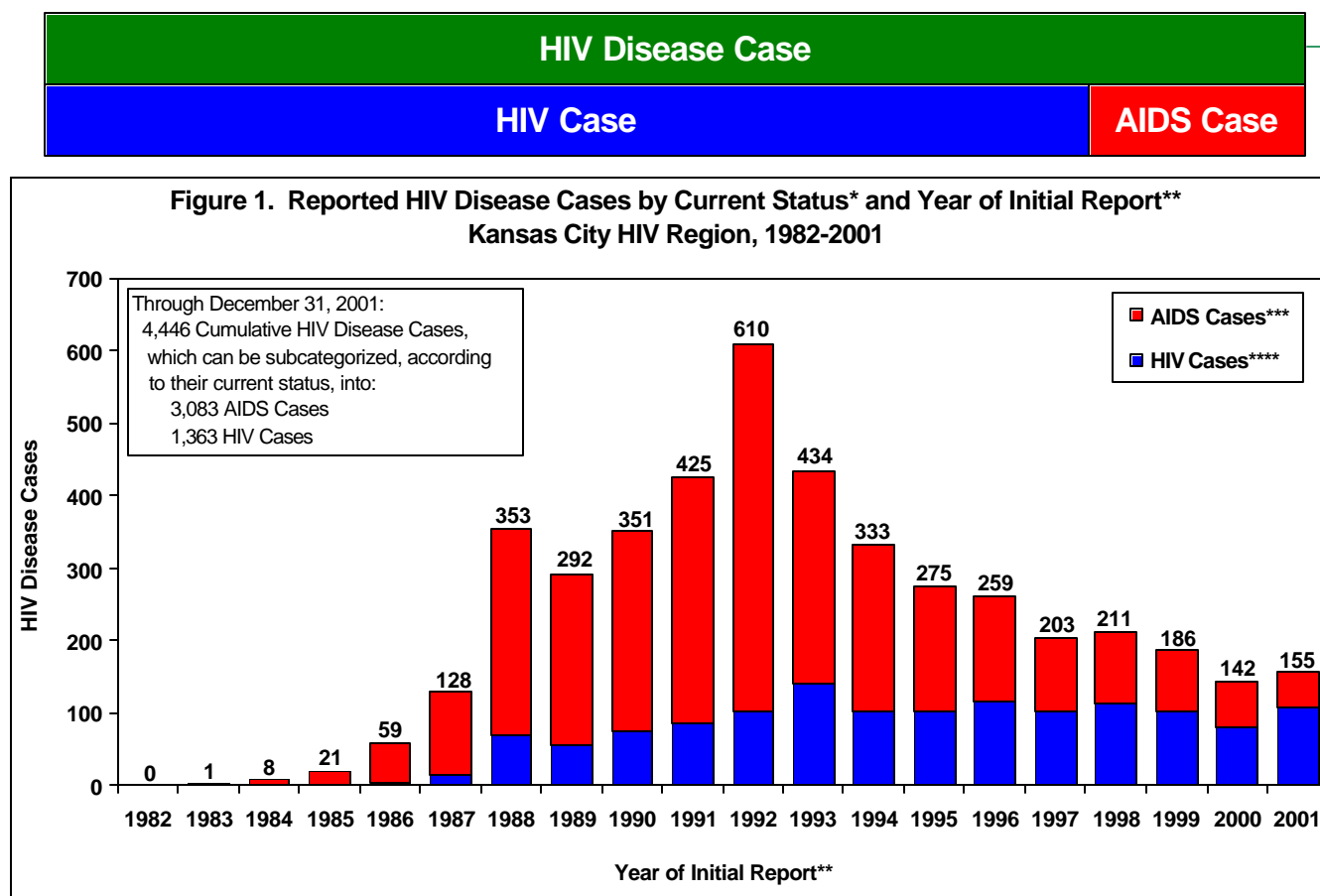
HIV Disease Epi Profile Summary: Kansas City HIV Region

Magnitude and Impact of the Problem

- From 1983 through 2001, a total of 4,446 HIV Disease cases have been reported in residents in the Kansas City HIV Region. In 2001, 155 new HIV Disease cases were reported for the first time to public health officials. Figure 1 shows reported HIV Disease cases by current status (HIV case vs. AIDS case) and year of initial report (i.e., the year in which the first report of the person, whether as an HIV case or an AIDS case, was received). (See also the section entitled “**Trends**” on page 144.)
- Of these 4,446 HIV Disease cases, 3,083 (69.3%) have met the case definition for AIDS and are thus categorized as AIDS cases; 1,691 (54.8%) of the 3,083 reported AIDS cases are known to have died, and 1,392 (45.2%) are living. In 2001, 87 AIDS cases were reported. Figure 2 (page 141) shows persons (living and deceased) diagnosed with AIDS by year of report (see also section entitled “**Trends**” on page 144).
- The Centers for Disease Control and Prevention (CDC) reports that, in 2000, 178 AIDS cases were reported from the Kansas City Metropolitan Area[#]; the corresponding rate was 10.0 cases per 100,000 population. This rate is slightly more than half the average rate for all U.S. metropolitan areas with 500,000 or more population (18.9).
- Of the 4,446 reported HIV Disease cases, 1,363 (30.7%) have not met the case definition for AIDS, and are thus categorized as HIV cases; 108 HIV cases* were reported in 2001.

[#]The Kansas City Metropolitan Area consists of ten Missouri counties (Bates, Benton, Cass, Clay, Henry, Jackson, Johnson, Lafayette, Platte, and Ray), and four Kansas counties (Johnson, Leavenworth, Miami, and Wyandotte).

^{**}When reference is made to HIV cases reported in 2001, this means HIV cases reported during that year which remained HIV cases at the end of the year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included (instead, they are included among the AIDS cases reported in 2001).



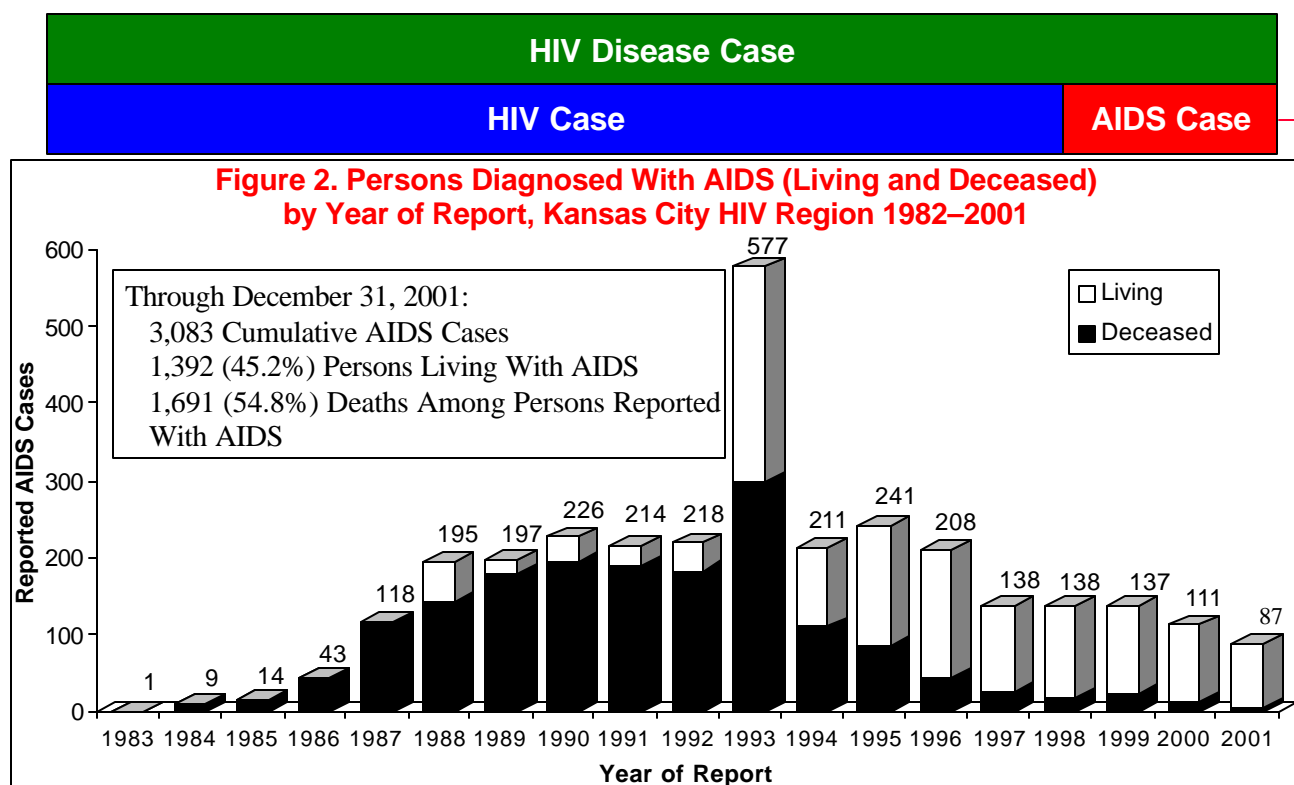
*HIV Cases vs. AIDS Cases

**Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)

***These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition; or 2) initially reported as an AIDS case.

****These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

HIV Disease Epi Profile Summary: Kansas City HIV Region



Who

- Table 1 describes HIV cases, AIDS cases, and HIV Disease cases by gender, race/ethnicity, and age at diagnosis.
- Males comprise 86.3% of the 1,363 cumulative reported HIV cases and 92.6% of the 3,083 cumulative reported AIDS cases.
- Blacks* are disproportionately represented among reported cases of HIV Disease. Although blacks make up only about 15% of the Kansas City HIV Region's population, they accounted for 44.4% of HIV cases and 44.8% of AIDS cases reported in 2001. The rate for HIV cases reported in 2001 in blacks (27.6) was 4.7 times the rate in whites* (5.9).
- The over-representation of blacks is especially seen in reported HIV and AIDS cases in females. Of the 17 female HIV cases reported in 2001, 11 (64.7%) were in black females. Of the 15 female AIDS cases reported in 2001, 9 (60.0%) were in black females.
- Hispanics have accounted for 64 cumulative reported HIV cases (4 cases reported in 2001); and 117 cumulative AIDS cases (6 cases reported in 2001).
- The numbers of total reported HIV and AIDS cases in Asians and American Indians have been small (10 HIV cases and 9 AIDS cases in Asians; 5 HIV cases and 25 AIDS cases in American Indians). One HIV case and 3 AIDS cases were reported in Asians in 2001. No HIV or AIDS cases were reported in American Indians in 2001.
- Of the 108 HIV cases reported in 2001, 39.8% were diagnosed in 30-39 year olds, 30.6% in 20-29 year olds, 18.5% in 40-49 year olds, 7.4% in persons 50 years of age and older, and 2.8% in 13-19 year olds.
- Of the 107 adult/adolescent HIV cases reported in 2001: 51 (47.7%) were in men who have sex with men (MSM); 6 (5.6%) in men who have sex with men and inject drugs (MSM/IDUs); 13 (12.1%) in heterosexual contacts; and 37 (34.6%) are still being investigated and have not yet been placed in a specific exposure category.
- Of the 87 adult/adolescent AIDS cases reported in 2001: 44 (50.6%) were in MSM; 6 (6.9%) in MSM/IDUs; 8 (9.2%) in IDUs; 13 (14.9%) in heterosexual contacts; and 16 (18.4%) are still being investigated and have not yet been placed in a specific exposure category.
- Table 2 shows HIV and AIDS cases by adjusted exposure category. In this table, those cases currently classified as "Other/Unknown Adult", many of which are still under investigation, have been assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, heterosexual contact) in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of these cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation.
- A total of 10 perinatal HIV cases and 9 perinatal AIDS cases have been reported; in 2001, 1 perinatal HIV case was reported. No perinatal AIDS cases were reported in 2001. (Perinatal cases are the result of HIV transmission from an infected mother to her infant before or at the time of birth, or through breastfeeding.)
- Information on HIV-exposed infants is found in the "**Missouri**" section on page 21.

*Throughout this document, whenever HIV disease is being discussed, the term "white" indicates a non-Hispanic white person, and "black" indicates a non-Hispanic black individual. All persons whose ethnicity is reported as Hispanic, regardless of race (e.g., white or black), are characterized as "Hispanic".

HIV Disease Epi Profile Summary: Kansas City HIV Region

HIV Disease Case

HIV Case

AIDS Case

Table 1. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Age at Diagnosis, Kansas City HIV Region, 1982–2001

	HIV Cases				AIDS Cases				HIV Disease	
	Reported 2001*	%	Cumulative	%	Reported 2001	%	Cumulative	%	Cumulative	%
Cases			Cases		Cases		Cases		Cases	
Gender										
Male	91	(84.3%)	1,179	(86.3%)	72	(82.8%)	2,854	(92.6%)	4,033	(90.9%)
Female	17	(15.7%)	184	(13.7%)	15	(17.2%)	229	(7.4%)	413	(9.1%)
Race/Ethnicity										
White	54	(50.0%)	790	(57.7%)	39	(44.8%)	2,146	(69.6%)	2,936	(66.5%)
Black	48	(44.4%)	493	(36.3%)	39	(44.8%)	786	(25.5%)	1,279	(28.4%)
Hispanic	4	(3.7%)	64	(4.8%)	6	(6.9%)	117	(3.8%)	181	(4.0%)
Asian/Pacific Islander	1	(0.9%)	10	(0.8%)	3	(3.4%)	9	(0.3%)	19	(0.4%)
American Indian	0	(0.0%)	5	(0.4%)	0	(0.0%)	25	(0.8%)	30	(0.7%)
Unknown	1	(0.9%)	1	(0.0%)	0	(0.0%)	0	(0.0%)	1	(0.0%)
Race/Ethnicity and Gender										
White Male	48	(44.4%)	721	(52.8%)	35	(40.2%)	2,044	(66.3%)	2,765	(62.7%)
Black Male	37	(34.3%)	386	(28.3%)	30	(34.5%)	666	(21.6%)	1,052	(23.4%)
Hispanic Male	4	(3.7%)	58	(4.3%)	4	(4.6%)	112	(3.6%)	170	(3.8%)
Asian/Pacific Islander Male	1	(0.9%)	8	(0.6%)	3	(3.4%)	9	(0.3%)	17	(0.3%)
American Indian Male	0	(0.0%)	5	(0.4%)	0	(0.0%)	23	(0.7%)	28	(0.7%)
Unknown Male	1	(0.9%)	1	(0.0%)	0	(0.0%)	0	(0.0%)	1	(0.0%)
White Female	6	(5.6%)	9	(4.9%)	4	(4.6%)	102	(3.3%)	171	(3.8%)
Black Female	11	(10.2%)	107	(8.0%)	9	(10.3%)	120	(3.9%)	227	(5.0%)
Hispanic Female	0	(0.0%)	6	(0.5%)	2	(2.3%)	5	(0.2%)	11	(0.2%)
Asian/Pacific Islander Female	0	(0.0%)	2	(0.2%)	0	(0.0%)	0	(0.0%)	2	(0.0%)
American Indian Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	2	(0.1%)	2	(0.0%)
Unknown Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Age at Diagnosis[‡]										
<13	1	(0.9%)	13	(0.9%)	0	(0.0%)	10	(0.3%)		
13-19	3	(2.8%)	44	(3.4%)	0	(0.0%)	23	(0.7%)		
20-29	33	(30.6%)	537	(40.3%)	13	(14.9%)	715	(23.2%)		
30-39	43	(39.8%)	534	(38.5%)	40	(46.0%)	1,429	(46.4%)		
40-49	20	(18.5%)	188	(13.8%)	18	(20.7%)	653	(21.2%)		
50+	8	(7.4%)	47	(3.2%)	16	(18.4%)	253	(8.2%)		
Kansas City HIV Region Total ..	108	(100.0%)	1,363	(100.0%)	87	(100.0%)	3,083	(100.0%)	4,446	(100.0%)

* HIV Cases reported during 2001 which remained HIV cases at the end of that year.

† For HIV Cases, Age at Diagnosis is the age at which the individual was first diagnosed with HIV infection.

‡ For AIDS Cases, Age at Diagnosis is the age at which the individual was first diagnosed with AIDS.

Table 2. HIV and AIDS Cases by Adjusted Exposure Category*, Kansas City HIV Region Reported 2001 and Cumulative Through December 2001

Exposure Category	HIV Cases				AIDS Cases			
	Reported 2001**	%	Cumulative	%	Reported 2001	%	Cumulative	%
Case			Case		Case		Case	
Adult/Adolescent								
Men Who Have Sex With Men	76	(71.0%)	928	(68.7%)	52	(59.8%)	2,276	(74.1%)
Men Who Have Sex With Men & Inject Drugs	8	(7.5%)	113	(8.4%)	7	(8.0%)	360	(11.7%)
Injecting Drug Use	2	(1.9%)	106	(7.9%)	10	(11.5%)	199	(6.5%)
Heterosexual Contact	21	(19.6%)	194	(14.4%)	18	(20.7%)	189	(6.2%)
Hemophilia/Coagulation Disorder	0	(0.0%)	6	(0.4%)	0	(0.0%)	22	(0.7%)
Blood Transfusion or Tissue Recipient	0	(0.0%)	3	(0.2%)	0	(0.0%)	25	(0.8%)
Risk Not Specified	--	--	--	--	--	--	--	--
Adult/Adolescent Subtotal	107	(100.0%)	1,350	(100.0%)	87	(100.0%)	3,071	(100.0%)
Pediatric Subtotal	1		13		0		12	
Total	108		1,363		87		3,083	

* Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

HIV Disease Epi Profile Summary: Kansas City HIV Region

Where

- Of the 1,363 cumulative HIV cases reported from the Kansas City HIV Region, 83.0% were from Kansas City, 8.7% from Jackson County[#], and 2.9% from Clay County[#]. The remaining 74 (5.4%) cases came from the 8 other counties in the region; each of these counties had 3-18 reported cases. See Figure 9 in the “Missouri” section (page 25). Of 493 cumulative HIV cases reported in blacks, the vast majority were from Kansas City (474 cases, or 96.1%) and Jackson County[#] (13 cases, or 2.6%).
- Of the 3,083 cumulative AIDS cases reported from the Kansas City HIV Region, 2,535 (82.2%) were from Kansas City, 321 (10.4%) from Jackson County[#], and 86 (2.8%) from Clay County[#]. The remaining 141 (4.6%) cases came from the 8 other counties in the region; each of these counties had 7-40 reported cases. See Figure 10 in the “Missouri” section (page 25). Of 786 cumulative AIDS cases reported in blacks, 749 (95.3%) were from Kansas City and 26 (3.3%) from Jackson County[#].
- Tables 3 and 4 summarize cumulative reported HIV and AIDS cases by race/ethnicity and area.
- Table 5 summarizes the numbers and rates of HIV cases reported in 2001 by race/ethnicity and area. The highest rates, and the largest numbers of reported cases, are from Kansas City. For HIV cases reported in 2001, the rate for cases reported from Kansas City is 20.3.
- Of the 89 HIV cases reported from Kansas City in 2001, 50.6% were in blacks and 44.9% were in whites.
- Table 8 in the “Missouri” section (page 24) compares the numbers and rates of HIV and AIDS cases reported from persons in the Kansas City HIV Region (and Kansas City) with corresponding numbers and rates of HIV and AIDS cases reported from other areas in the state.

[#]Outside the city limits of Kansas City.

**Table 3. Reported HIV Cases by Race/Ethnicity and Area
Kansas City HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic		Hispanic	
	Cases	%	Cases	%	Cases	%	Cases	%
Kansas City[†]	1,131	100.0%	588	52.0%	474	41.9%	57	5.0%
Jackson County^{†#}	119	100.0%	99	83.2%	13	10.9%	5	4.2%
Clay County^{†#}	39	100.0%	35	89.7%	2	5.1%	2	5.1%
Cass County^{†#}	18	100.0%	18	100.0%	0	0.0%	0	0.0%
Platte County^{†#}	18	100.0%	16	88.9%	1	5.6%	0	0.0%
Remainder of Region[†]	38	100.0%	34	89.5%	3	7.9%	0	0.0%
Kansas City HIV Region[†]	1,363	100.0%	790	58.0%	493	36.2%	64	4.7%

[†] Does not include persons living in correctional facilities at the time of diagnosis.

[#] Outside the city limits of Kansas City.

Note: Row percentages are shown.

**Table 4. Reported AIDS Cases by Race/Ethnicity and Area
Kansas City HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic		Hispanic	
	Cases	%	Cases	%	Cases	%	Cases	%
Kansas City[†]	2,535	100.0%	1,653	65.2%	749	29.5%	105	4.1%
Jackson County^{†#}	321	100.0%	281	87.5%	26	8.1%	11	3.4%
Clay County^{†#}	86	100.0%	82	95.3%	3	3.5%	1	1.2%
Cass County^{†#}	40	100.0%	40	100.0%	0	0.0%	0	0.0%
Platte County^{†#}	24	100.0%	23	95.8%	0	0.0%	0	0.0%
Remainder of Region[†]	77	100.0%	67	87.0%	8	10.4%	0	0.0%
Kansas City HIV Region[†]	3,083	100.0%	2,146	69.6%	786	25.5%	117	3.8%

[†] Does not include persons living in correctional facilities at the time of diagnosis.

[#] Outside the city limits of Kansas City.

Note: Row percentages are shown.

HIV Disease Epi Profile Summary: Kansas City HIV Region

Table 5. Reported HIV Cases and Rates by Race/Ethnicity and Area, Kansas City HIV Region, 2001

Geographic Area	Total			White, Non-Hispanic			Black, Non-Hispanic			Hispanic		
	Cases	%	Rate*	Cases	%	Rate*	Cases	%	Rate*	Cases	%	Rate*
Kansas City [†]	89	100.0%	20.3	40	44.9%	14.3	45	50.6%	34.6	4	4.5%	21.2
Jackson County ^{‡§}	11	100.0%	3.4	8	72.7%	---	3	27.3%	---	0	0.0%	---
Remainder of Region [†]	8	100.0%	2.0	6	75.0%	---	0	0.0%	---	0	0.0%	---
Kansas City HIV Region [†]	108	100.0%	9.4	54	50.0%	5.9	48	44.4%	27.7	4	3.7%	10.4

*Per 100,000 population.
[†]Does not include persons living in correctional facilities at the time of diagnosis.
[‡]Outside the city limits of Kansas City.
[§]Note: Row percentages are shown.

- Table 9 in the “Missouri” section (page 25) shows numbers and rates of HIV cases reported in 2001 by race/ethnicity for Kansas City, and compares these figures with those for HIV cases reported from St. Louis City and County and Outstate Missouri.
- Table 10 in the “Missouri” section (page 25) shows numbers and rates of HIV cases reported in 2001 by race/ethnicity for the Kansas City HIV Region, and compares these figures with those for HIV cases reported from Missouri’s other HIV Regions.

**Table 6. AIDS Cases By County
Kansas: Four Counties in Kansas City Area
Cumulative Through December 2001**

COUNTY	AIDS CASES CUMULATIVE	
JOHNSON	410	46.1%
LEAVENWORTH	83	9.3%
MIAMI	6	0.7%
WYANDOTTE	390	43.9%
TOTAL	889	100.0%

*Johnson, Leavenworth, Miami, and Wyandotte Counties.

**Table 7: AIDS Cases By Exposure Category
Kansas: Four Counties in Kansas City Area
Cumulative Through December 2001**

EXPOSURE CATEGORY	AIDS CASES CUMULATIVE	
ADULT/ADOLESCENT		
MEN WHO HAVE SEX WITH MEN	568	64.3%
MEN WHO HAVE SEX WITH MEN & INJECT DRUGS	71	8.0%
INJECTING DRUG USE	82	9.3%
HETEROSEXUAL CONTACT	80	9.0%
HEMOPHILIA/COAGULATION DISORDER	19	2.1%
BLOOD TRANSFUSION OR TISSUE RECIPIENT	20	2.3%
RISK NOT SPECIFIED	44	5.0%
ADULT/ADOLESCENT SUBTOTAL	884	100.0%
PEDIATRIC (<13 YEARS OLD)		
MOTHER WITH/AT RISK OF HIV INFECTION	3	60.0%
OTHER/UNKNOWN	2	40.0%
PEDIATRIC SUBTOTAL	5	100.0%
TOTAL	889	

*Johnson, Leavenworth, Miami, and Wyandotte Counties.

**Table 8. AIDS Cases By Gender
Race/Ethnicity, and Age Group
Kansas: Four Counties in Kansas City Area
Cumulative Through December 2001**

	AIDS CASES CUMULATIVE	
GENDER		
MALES	816	91.8%
FEMALES	73	8.2%
RACE/ETHNICITY		
WHITE	633	71.2%
BLACK	185	20.8%
HISPANIC	60	6.7%
OTHER/UNKNOWN	11	1.2%
AGE GROUP		
<13	4	0.4%
13-19	5	0.6%
20-29	195	21.9%
30-39	380	42.7%
40-49	210	23.6%
>49	95	10.7%
TOTAL	889	

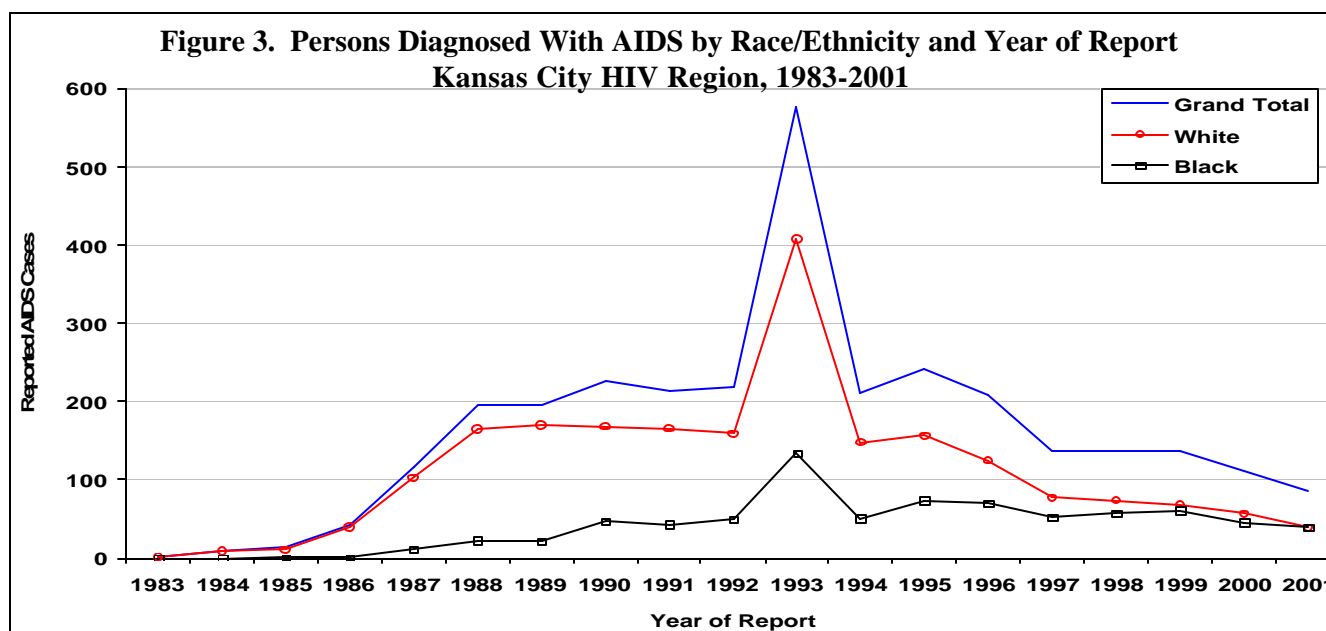
*Johnson, Leavenworth, Miami, and Wyandotte Counties.

HIV Disease Epi Profile Summary: Kansas City HIV Region

- Figures 15 and 16 on page 152 show reported HIV and AIDS cases for Kansas City by zip code area.
- Figure 8 in the “**Missouri**” section (page 23) shows, for the counties within Kansas City HIV Region (as well as for the entire state), the numbers of living HIV Disease cases who have been reported to the Missouri Department of Health and Senior Services and who were residents of these counties when diagnosed.
- Tables 6, 7, and 8 provide information on AIDS cases in the four Kansas counties which are part of the Kansas City Metropolitan area.

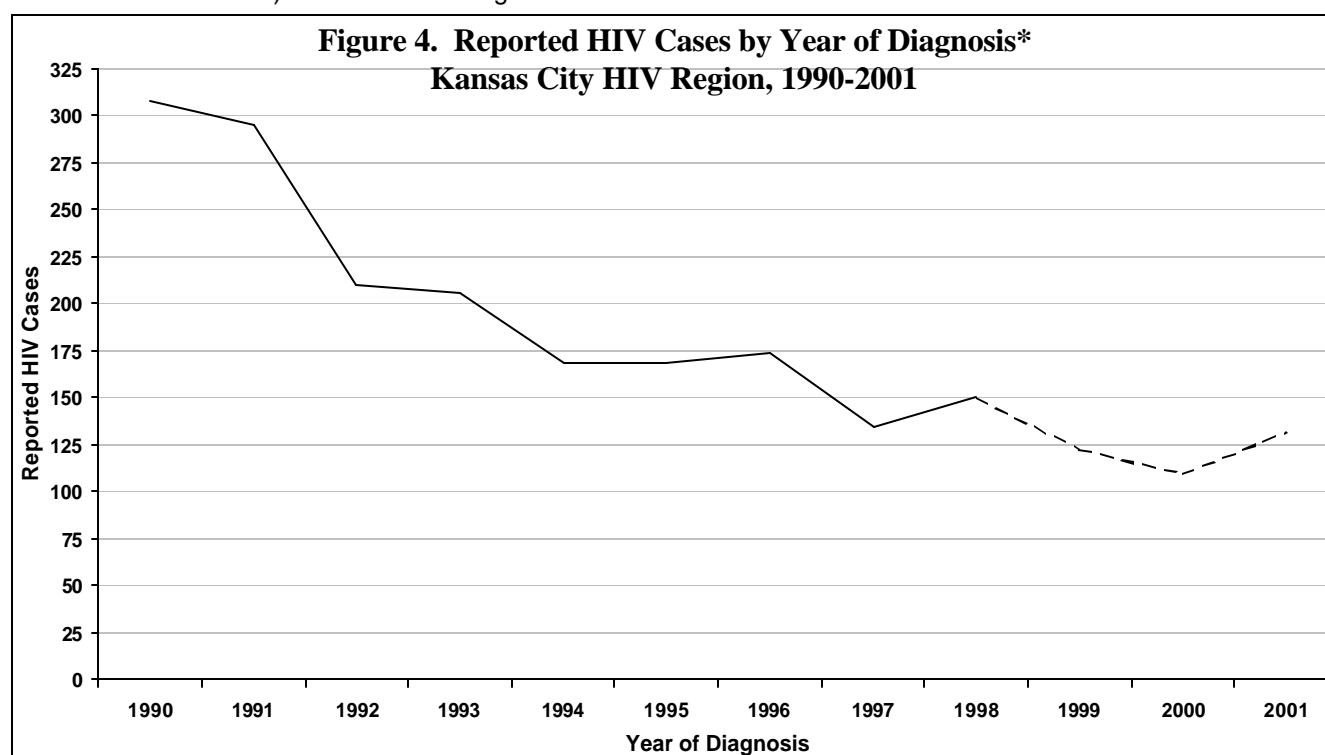
Trends

- The 155 HIV Disease cases initially reported in Kansas City HIV Region residents in 2001 represented a 9.2% increase from the 142 cases reported in 2000 (see Figure 1 on page 139).
- The annual number of reported AIDS cases in Kansas City HIV Region residents has been decreasing the past two years. The 87 AIDS cases reported in 2001 represented a 21.6% decrease from the 111 cases reported in 2000. This decrease is generally similar to the 18.9% decrease in reported AIDS cases from 1999 to 2000. See Figure 2 on page 140.
- From 2000 to 2001 the number of reported AIDS cases in whites decreased by 31.6% (from 57 cases reported in 2000 to 39 cases in 2001), while the number of reported cases in blacks increased 15.2% (from 46 cases reported in 2000 to 53 cases in 2001). See Figure 3.
- Heterosexual contacts have, since the late-1980's, generally been making up a larger proportion of annually reported AIDS cases. For AIDS cases reported in 2001, it is estimated that eventually approximately 21% will be placed in the heterosexual contact exposure category (see Table 2). Five years previously (in 1996), heterosexual contacts made up only 8.2% of reported AIDS cases).
- Comparing reported HIV cases (which generally represent persons more recently infected with HIV) with reported AIDS cases (which generally represent persons less recently infected) is a potential means of discerning which groups are increasingly becoming involved in the epidemic.
 - As indicated in Table 1 (on page 141), a higher proportion of cumulative HIV cases, compared to cumulative AIDS cases, are female and black, providing evidence that among more recently infected persons a larger proportion are female and black.
 - In Table 2, cases currently placed in the “Other/Unknown” exposure category have been reassigned to a specific exposure category (such as MSM or heterosexual contact) based on past experience in reassigning such cases following investigation. As a result, HIV and AIDS cases can be better compared with regard to involvement in the epidemic by persons in different exposure categories. The data contained in Table 2 indicate that a lower proportion of cumulative HIV cases, compared to cumulative AIDS cases, are MSM, and a higher proportion are heterosexual contacts. This provides evidence that among more recently infected persons, a smaller proportion are MSM and a larger proportion are heterosexual contacts. (However, it appears that the largest number of new infections continue to result from male homosexual contact [e.g., it is estimated that approximately 71% of HIV cases reported in 2001 were in MSM].)



HIV Disease Epi Profile Summary: Kansas City HIV Region

- Figure 4 shows reported HIV cases[†] by year of diagnosis^{††} for the period from 1990-2001. During this period, the annual number of diagnosed HIV cases generally has been decreasing. However, in 2001, approximately 130 new HIV cases are estimated to have been diagnosed, an increase of about 20 cases from the preceding year.
- Figures 5-9 show reported HIV cases[†] by year of diagnosis^{††} according to gender, race/ethnicity, race/ethnicity and gender, age group, and exposure category. (Some caution should be exercised in interpreting these graphs, and the similar graphs which follow, given the fact that the numbers for more recent years are estimates that attempt to adjust for reporting delays.)
- The increases in diagnosed HIV cases from 2000 to 2001 were most noticeable in white males, persons 30-39 years of age, and MSM. However, smaller increases appear to have occurred in certain other groups, (e.g., MSM/IDU and heterosexual contacts) as shown in the figures.

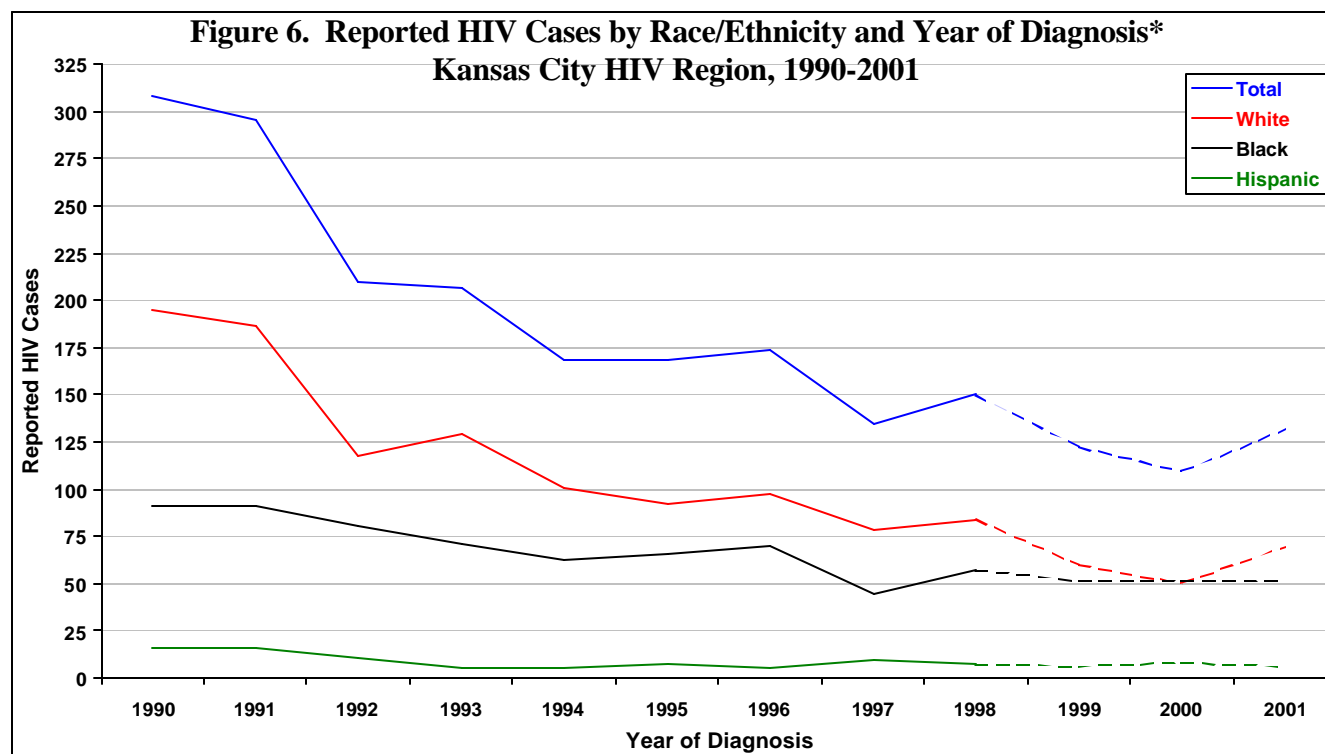
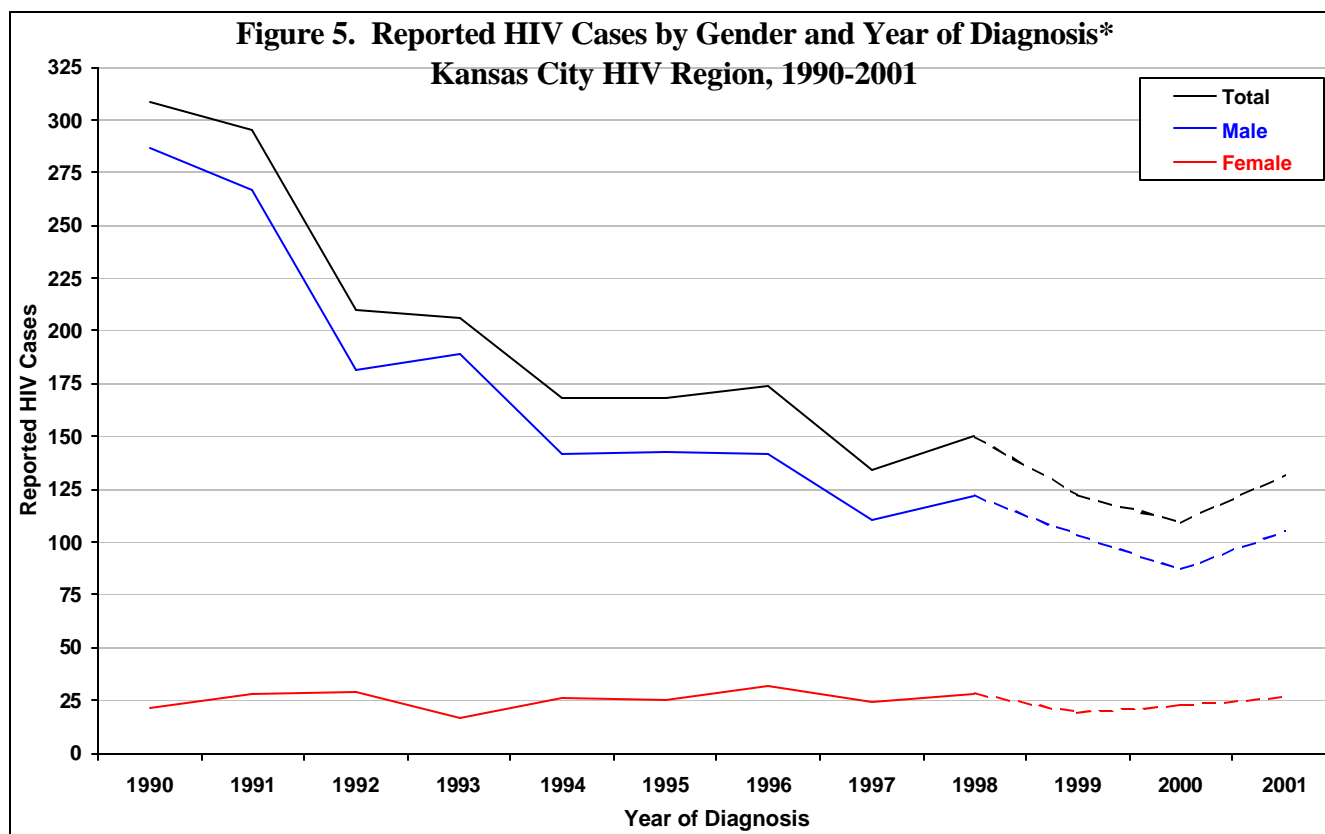


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

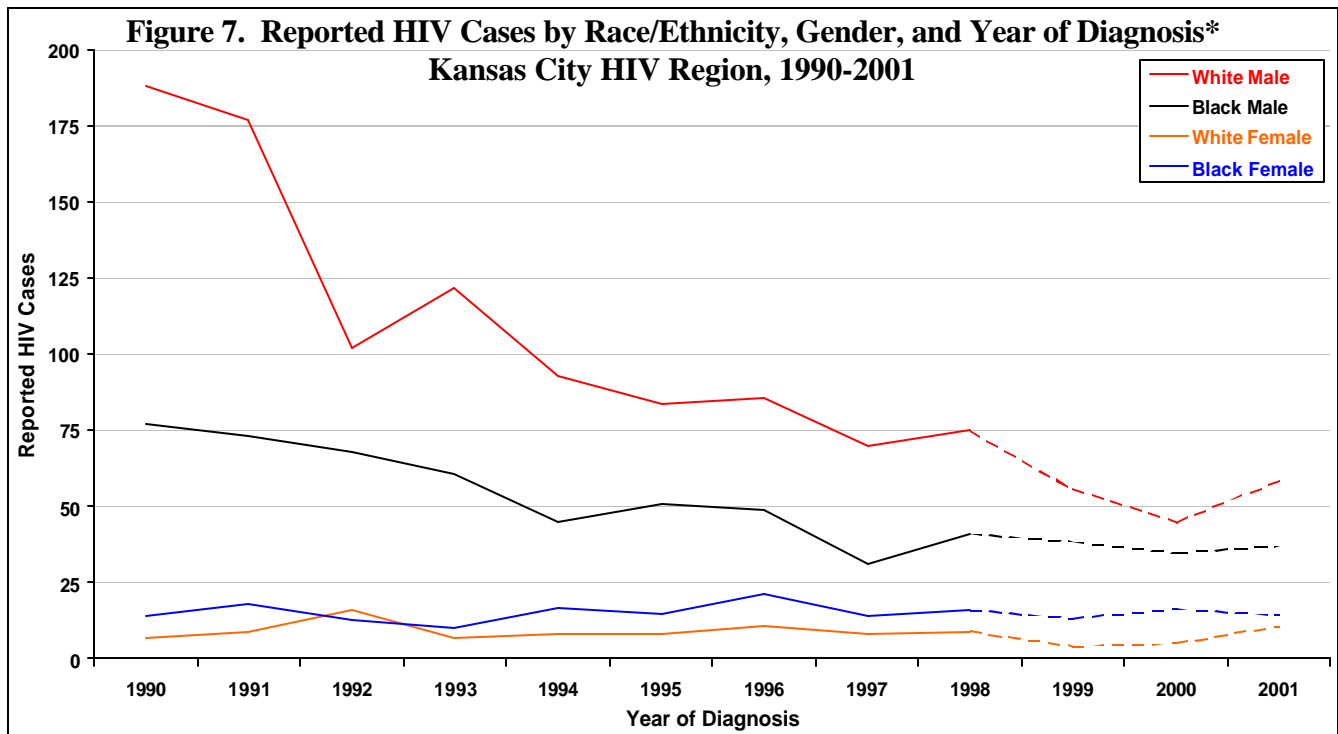
[†] The HIV cases shown in Figures 4-9 represent individuals who were HIV cases (i.e., HIV infected but not AIDS) at the time of initial diagnosis of HIV infection. Some of these individuals have subsequently progressed to AIDS, while the rest currently remain HIV cases. However, in these figures, where the emphasis is on status at the time of initial diagnosis, all are considered HIV cases. (This is in contrast to the way data is presented in Table 1 and similar tables. In these tables, once an individual who is an HIV case meets the case definition for AIDS, he or she is no longer counted as an HIV case, and instead is counted as an AIDS case.)

^{††} Adjustments were made for delays in reporting of cases. That is, for more recent years, not all cases diagnosed during these years have been reported as yet. To adjust for this, estimates were made, based on past experience, of the additional number of cases expected to ultimately be reported, and these expected cases were added to those already reported to give the estimated total number of cases for a given year as shown in the figure.

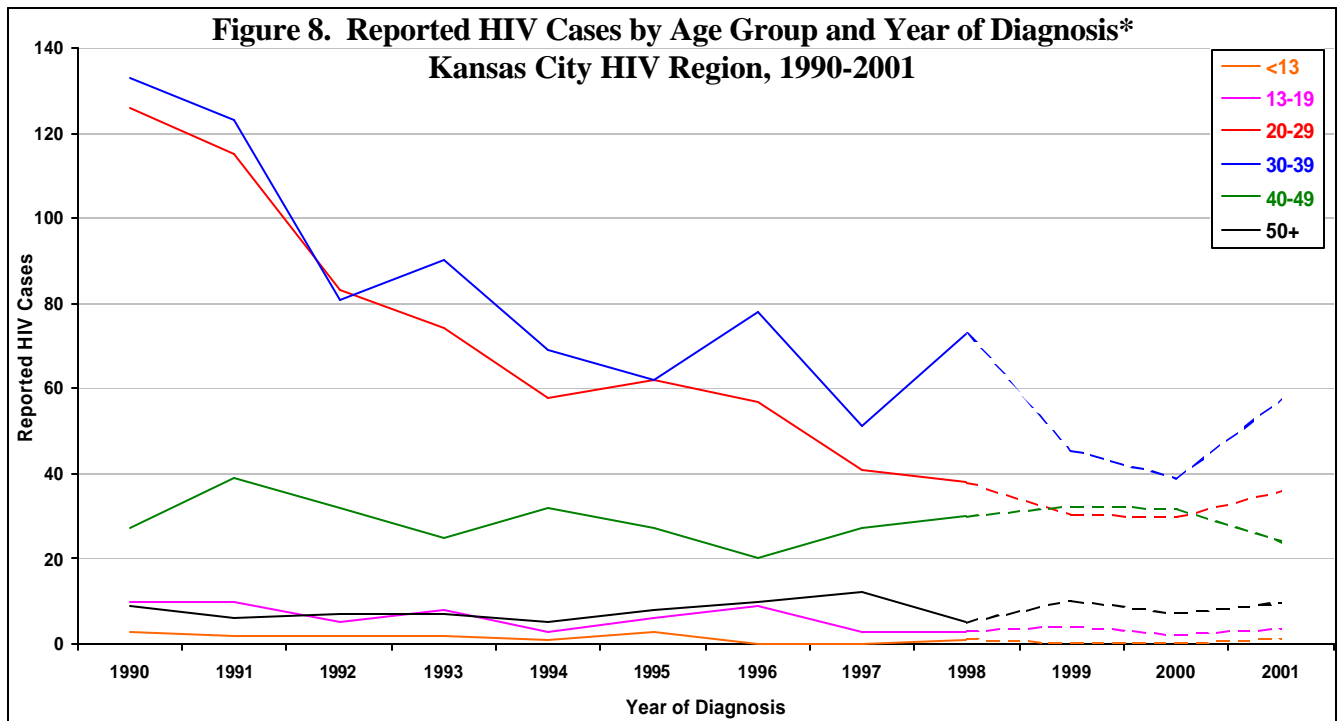
HIV Disease Epi Profile Summary: Kansas City HIV Region



HIV Disease Epi Profile Summary: Kansas City HIV Region

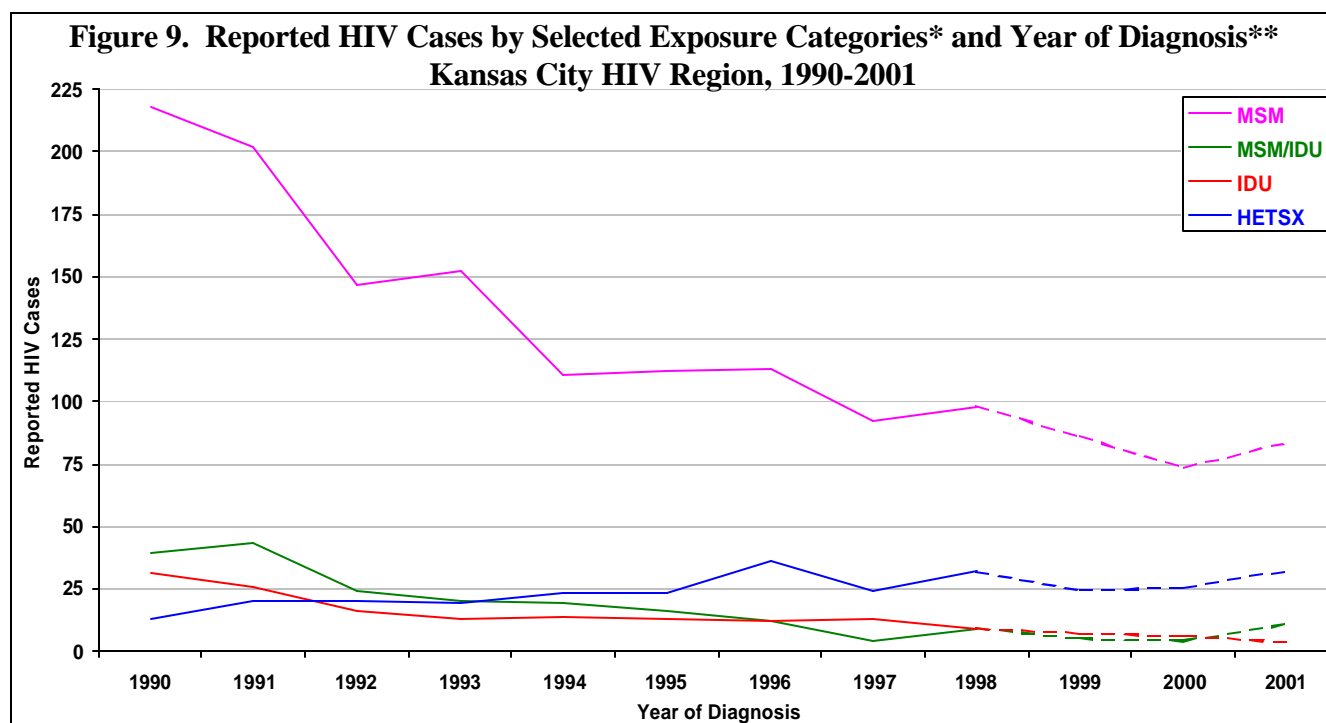


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Kansas City HIV Region



*MSM = men who have sex with men; MSM/IDU = men who have sex with men and inject drugs; IDU = injecting drug user; HETSX = heterosexual contact. Cases currently classified as "Risk Not Specified" (RNS), many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in diagnosed HIV cases. The proportion assigned to a given exposure category is based on past experience with RNS cases whose exposure risk has been discovered following investigation. Such experience indicates that almost all RNS cases whose exposure risk is eventually determined will be placed in one of the four exposure categories shown in this figure.

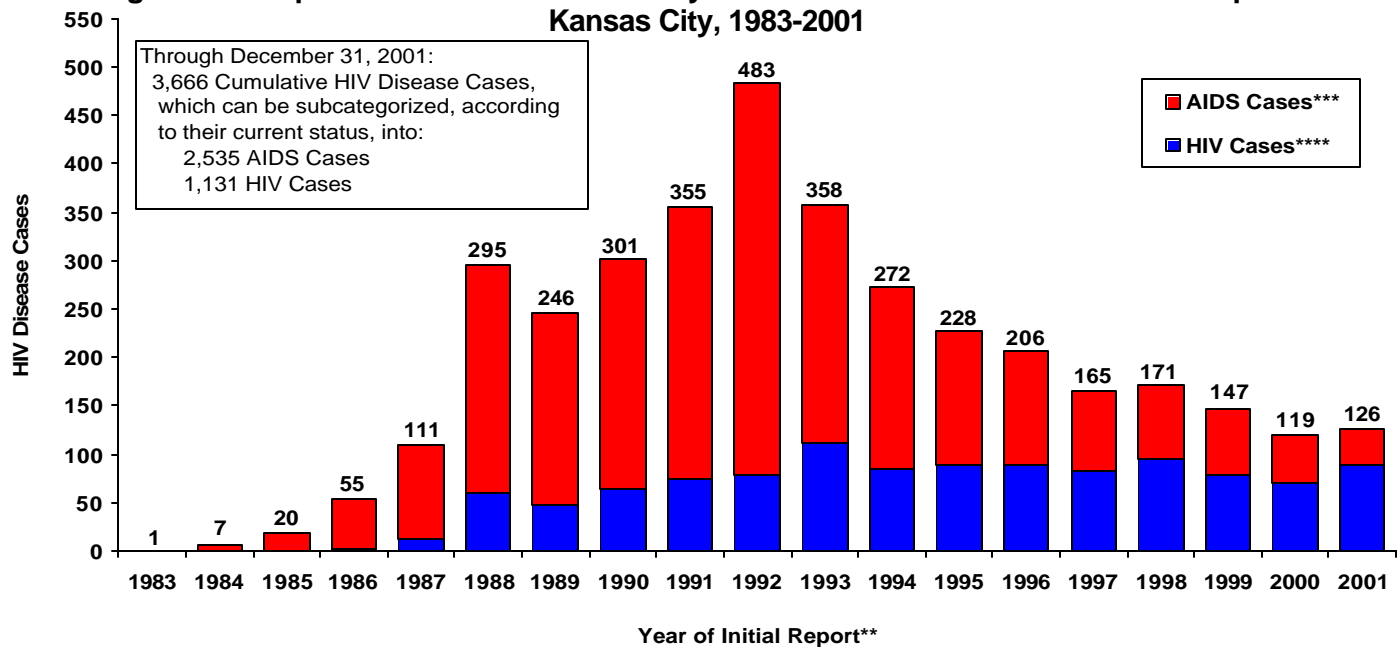
**Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

- Figures 11-14 (on pages 150-151) show reported HIV cases in Kansas City[†] by years of diagnosis^{††} according to race/ethnicity, race/ethnicity and gender, age group, and exposure category. Trends in diagnosed HIV cases from Kansas City are generally similar to those for the entire region, with an overall decline in diagnosed cases seen during the period from 1990 through 2000, and an increase (of about 15 cases) from 2000 to 2001. In 2001, it is estimated that approximately 105 HIV cases were diagnosed.
- The increase from 2000 to 2001 in diagnosed HIV cases were most noticeable in white males, persons 30-39 years of age, and in both MSM and MSM/IDU.

HIV Disease Epi Profile Summary: Kansas City HIV Region

Summary of HIV Disease Cases in Kansas City

Figure 10. Reported HIV Disease Cases by Current Status* and Year of Initial Report**



*HIV Cases vs. AIDS Cases

**Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)

***These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition; or 2) initially reported as an AIDS case.

****These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

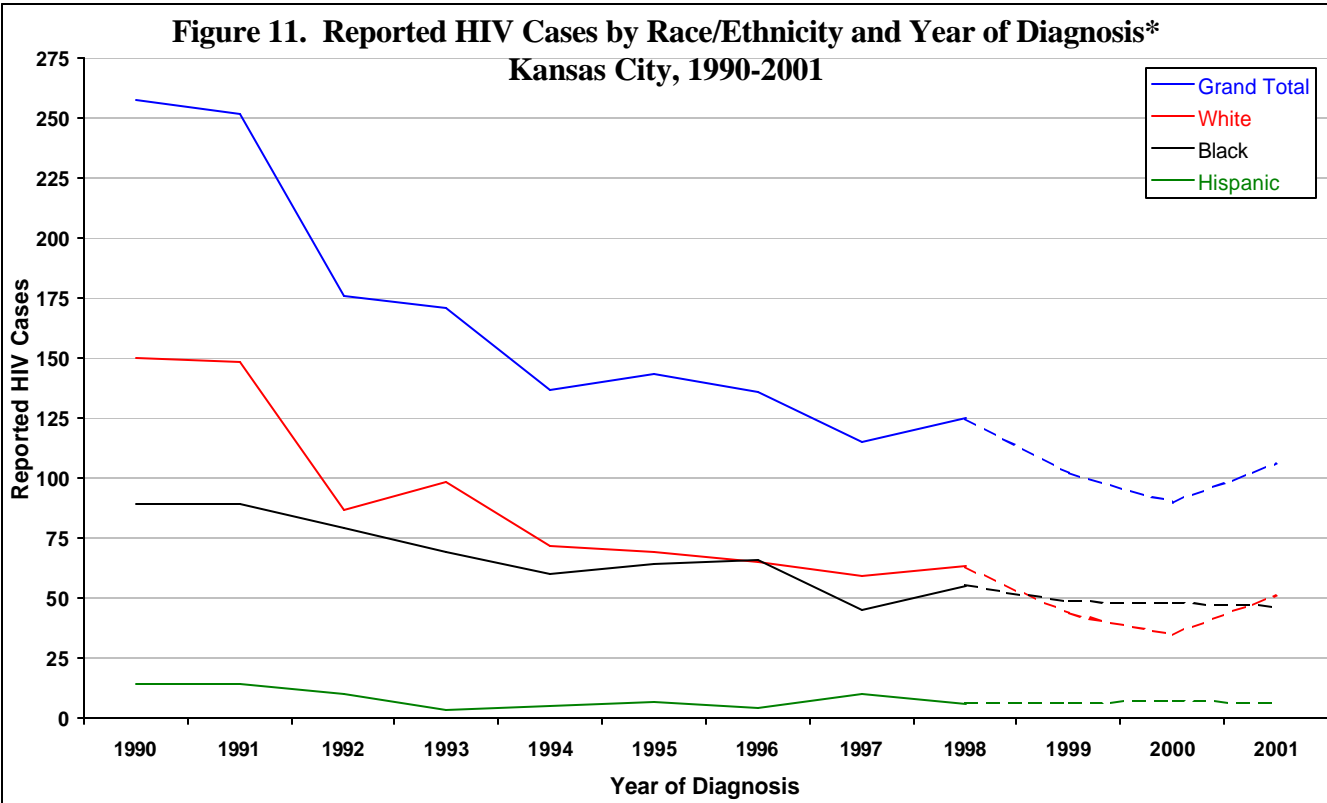
Table 9. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Adjusted Exposure Category*, Kansas City, Reported 2001 and Cumulative Through December 2001

	HIV Cases				AIDS Cases				HIV/AIDS Cases	
	Reported 2001**	%	Cumulative	%	Reported 2001	%	Cumulative	%	Cumulative	%
Gender										
Male	75	(84.3%)	979	(86.6%)	62	(84.9%)	2,361	(93.1%)	3,340	(91.1%)
Female	14	(15.7%)	152	(13.4%)	11	(15.1%)	174	(6.9%)	326	(8.9%)
Race/Ethnicity										
White	40	(44.9%)	588	(52.0%)	30	(41.1%)	1,653	(65.2%)	2,241	(61.1%)
Black	45	(50.6%)	474	(41.9%)	35	(47.9%)	749	(29.5%)	1,223	(33.4%)
Hispanic	4	(4.5%)	57	(5.0%)	5	(6.8%)	105	(4.1%)	162	(4.4%)
Asian/Pacific Islander	0	(0.0%)	8	(0.7%)	3	(4.1%)	6	(0.2%)	14	(0.4%)
American Indian	0	(0.0%)	4	(0.4%)	0	(0.0%)	22	(0.9%)	26	(0.7%)
Unknown	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Adjusted Exposure Category*										
Men Who Have Sex With Men	63	(70.8%)	790	(69.8%)	45	(61.6%)	1,892	(74.6%)	2,682	(73.2%)
Men Who Have Sex With Men & Inject Drugs	7	(7.9%)	94	(8.3%)	7	(9.6%)	305	(12.0%)	399	(10.9%)
Injecting Drug Users	1	(1.1%)	83	(7.3%)	8	(11.0%)	159	(6.3%)	242	(6.6%)
Heterosexual Contact	17	(19.1%)	152	(13.4%)	13	(17.8%)	145	(5.7%)	297	(8.1%)
Hemophilia/Coagulation Disorder	0	(0.0%)	3	(0.3%)	0	(0.0%)	10	(0.4%)	13	(0.4%)
Blood Trans. or Tissue Recipient	0	(0.0%)	1	(0.1%)	0	(0.0%)	15	(0.6%)	16	(0.4%)
Adult Risk Not Specified	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Perinatal Transmission	1	(1.1%)	7	(0.6%)	0	(0.0%)	7	(0.3%)	14	(0.4%)
Pediatric Hemophilia	0	(0.0%)	1	(0.1%)	0	(0.0%)	2	(0.1%)	3	(0.1%)
Pediatric Blood Transfusion	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Missouri Total	89 (100.0%)		1,131 (100.0%)		73 (100.0%)		2,535 (100.0%)		3,666 (100.0%)	

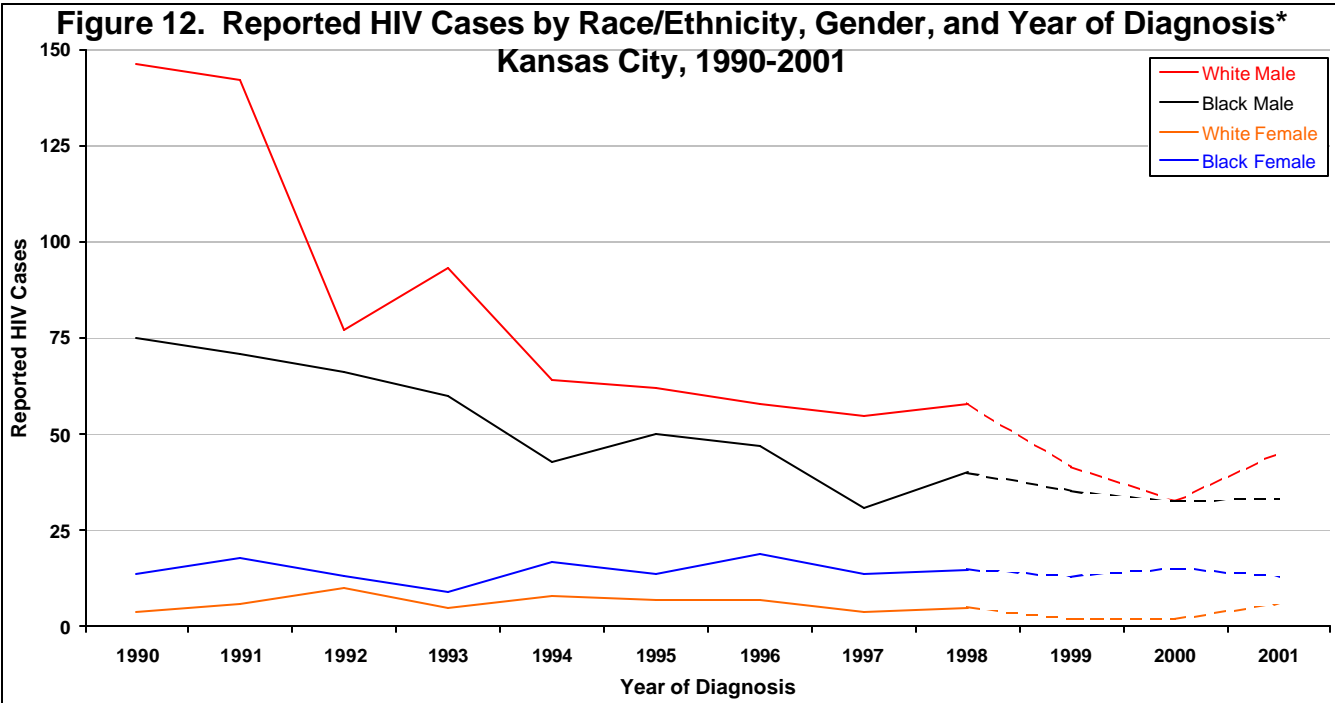
* Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

**HIV cases reported in 2001 which remained HIV cases at the end of that year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included.

HIV Disease Epi Profile Summary: Kansas City HIV Region

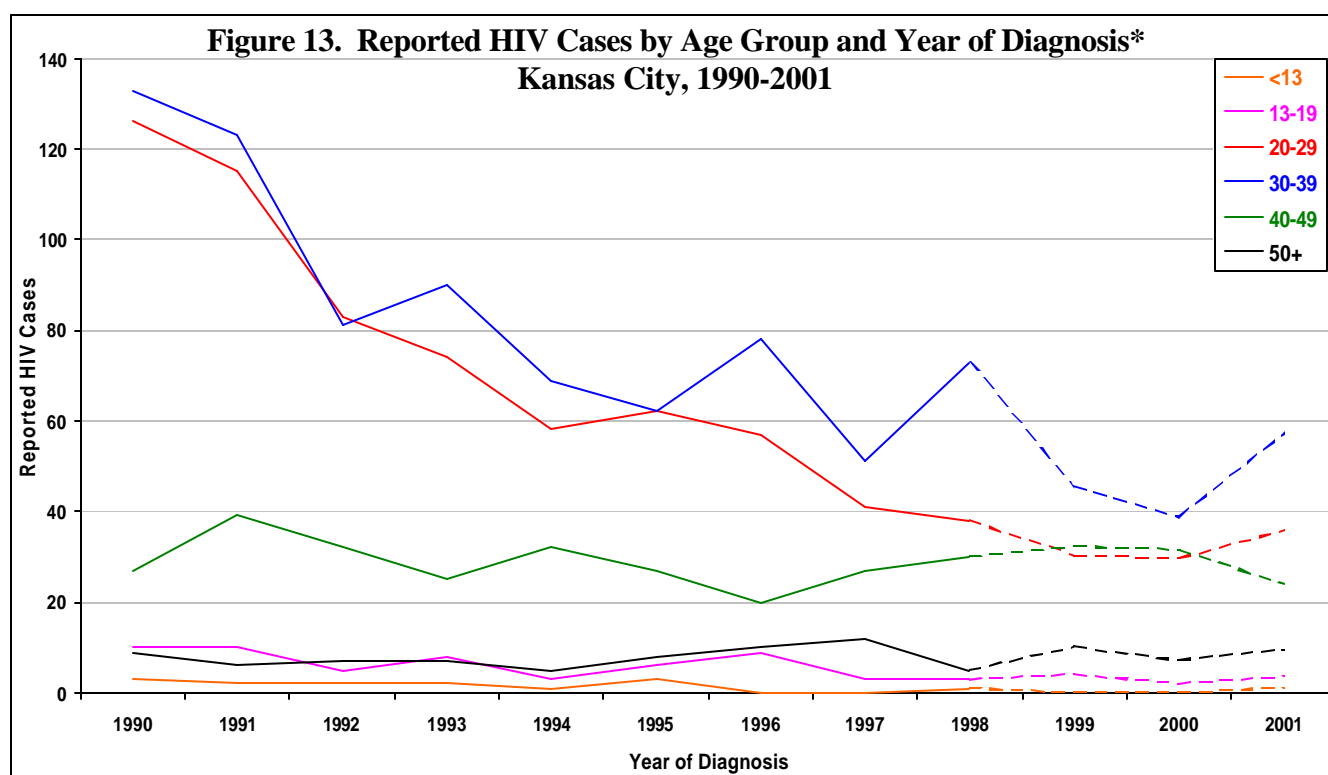


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

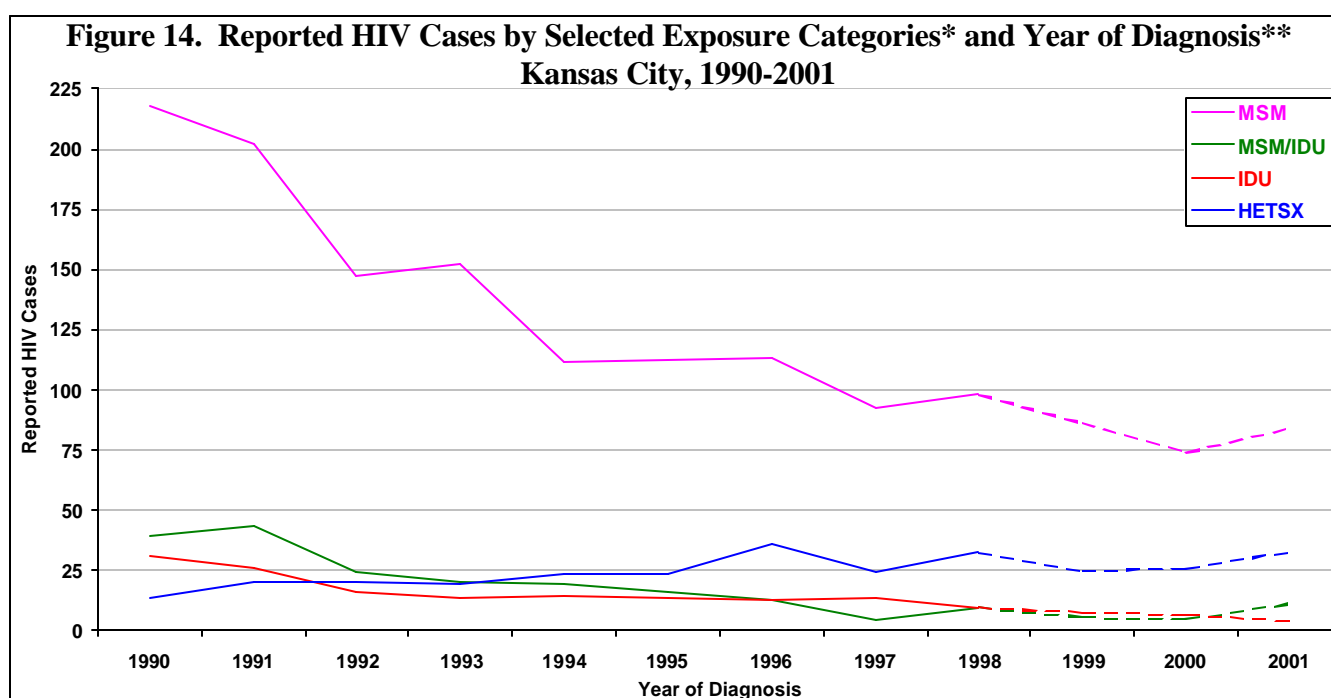


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Kansas City HIV Region



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*MSM = men who have sex with men; MSM/IDU = men who have sex with men and inject drugs; IDU = injecting drug user; HETSX = heterosexual contact. Cases currently classified as "Risk Not Specified" (RNS), many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in diagnosed HIV cases. The proportion assigned to a given exposure category is based on past experience with RNS cases whose exposure risk has been discovered following investigation. Such experience indicates that almost all RNS cases whose exposure risk is eventually determined will be placed in one of the four exposure categories shown in this figure.

**Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Kansas City HIV Region

Figure 15.
Reported HIV Cases by Zip Code Area, Clay, Jackson and Platte Counties
Cumulative Through December 2001

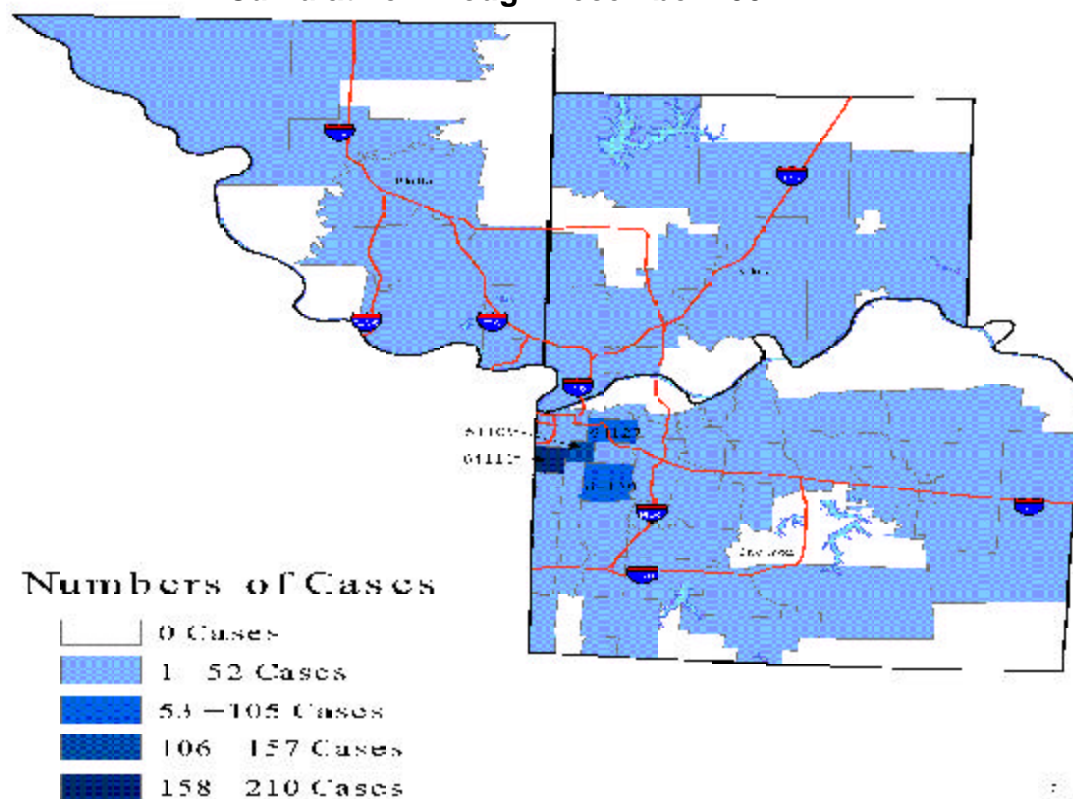
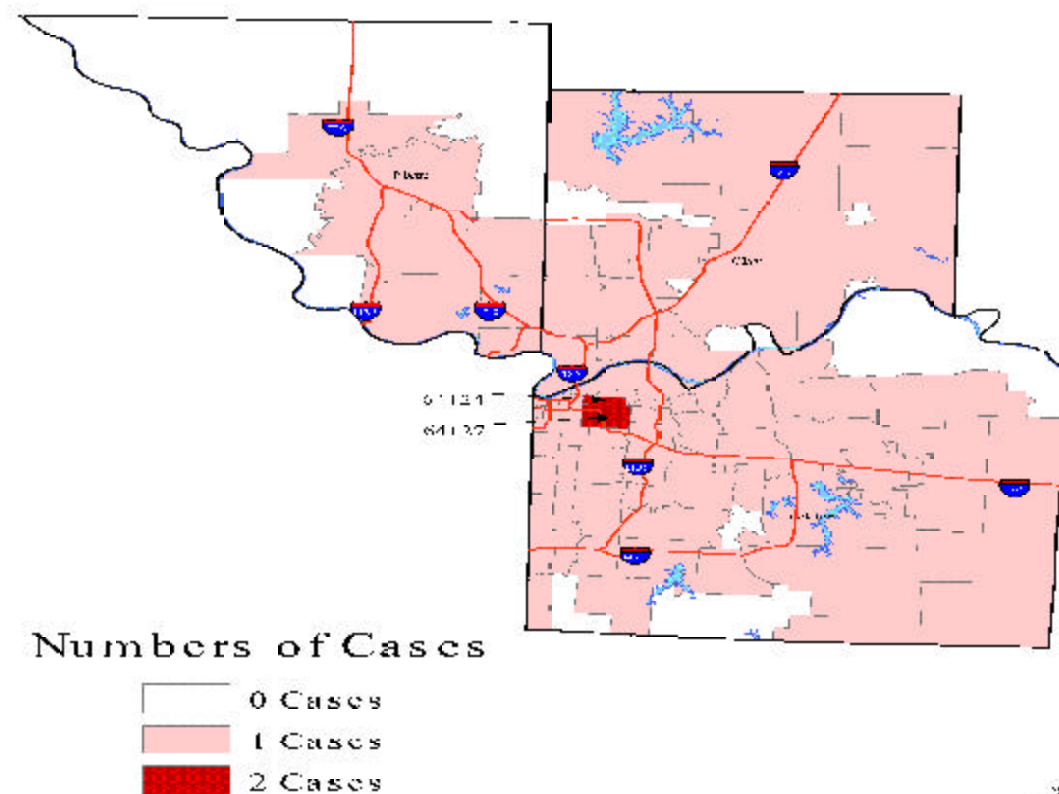


Figure 16.
Reported AIDS Cases by Zip Code Area, Clay, Jackson and Platte Counties
Cumulative Through December 2000



HIV Disease Epi Profile Summary: Kansas City HIV Region

Men Who Have Sex With Men (MSM)

Magnitude of the Problem

- From 1982 through 2001, a total of 3,061 HIV Disease cases in men who have sex with men (MSM) have been reported in Kansas City HIV Region residents (these cases make up 68.8% of all reported adult/adolescent HIV Disease cases in the region). Of these 3,061 HIV Disease cases, 2,233 (73.0%) are AIDS cases and 828 (27.0%) are HIV cases.
- The 2,233 AIDS cases in MSM make up 72.2% of all reported adult/adolescent AIDS cases in the region. In 2001, of the 87 adult/adolescent AIDS cases reported, 44 (50.6%) have, to date, been identified as being in MSM.
- The 828 HIV cases in MSM make up 61.3% of all reported adult/adolescent HIV cases in the region. In 2001, of the 107 adult/adolescent HIV cases reported, 51 (47.7%) have, to date, been identified as being in MSM.
- These numbers, however, do not indicate the full extent of MSM involvement since for 82 adult/adolescent AIDS cases, and 165 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the “Other/Unknown” exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with “Other/Unknown” cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 141). Here it is estimated that approximately 2,276 (74%) of the 3,071 total reported adult/adolescent AIDS cases, [and approximately 52 (60%) of the 87 adult/adolescent AIDS cases reported in 2001] were MSM. Likewise, it is estimated that approximately 928 (69%) of the 1,350 total reported adult/adolescent HIV cases, [and approximately 76 (71%) of the 107 adult/adolescent HIV cases reported in 2001] were MSM.

Who

- Table 10 shows reported HIV and AIDS cases in MSM by race/ethnicity.
- Of total reported HIV cases in MSM, white men comprise 64.5%, black men 29.3%, and Hispanic men 4.8%.
- White men comprise 74.6% of total reported AIDS cases among MSM, black men 20.8%, and Hispanic men 3.5%.
- Table 11 shows reported HIV cases in MSM by race/ethnicity and age group. Among white MSM, the largest proportion of reported HIV cases (42.9%) were in men 30-39 years of age at the time of initial diagnosis. Among black MSM, the largest proportion of cases (44.4%) were in men 20-29 years of age at the time of diagnosis. Among Hispanics the largest proportion (45.0%) were in men 20-29 years of age at the time of diagnosis. In addition, 5.8% of HIV cases in black MSM were diagnosed in teenagers (compared to 1.3% in whites).
- Information obtained through interviews with reported MSM HIV and AIDS cases indicates that at least 21% of these men (17% of white men and 33% of black men) have, in addition to having sex with other men, also had sex with females. (Note that these percentages may actually be higher because complete information may not have been obtained on all reported cases.)

Where

- Of the 828 total HIV cases reported in MSM, 707 (85.4%) were from Kansas City, 63 (7.6%) from Jackson County[#], 20 (2.4%) from Clay County[#], and 12 (1.4%) from Cass County[#]. The remaining cases were from the other counties in the HIV region (each of these counties reported less than 9 cases).
- Table 12 shows reported HIV cases in MSM by race/ethnicity and geographic area. Of total MSM HIV cases reported from Kansas City, black men make up 33.5%.

Trends

- Figure 17 shows reported HIV cases in MSM by race/ethnicity and year of diagnosis for the period of 1990-2001. During this period, the annual number of diagnosed HIV cases in MSM generally decreased through the year 2000. In 2001, approximately 85 new HIV cases are estimated to have been diagnosed, an increase of about 10 cases from the preceding year.
- As indicated in Table 2 (on page 141), a lower proportion of cumulative HIV cases (68.7%), compared to cumulative AIDS cases (74.1%), appear to be MSM, providing some evidence that among more recently infected persons a smaller proportion are MSM.

[#]Outside the city limits of Kansas City.

HIV Disease Epi Profile Summary: Kansas City HIV Region

Table 10. Reported HIV and AIDS Cases in Men Who Have Sex With Men by Race/Ethnicity, Kansas City HIV Region, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Cases	%	Cases	%	Cases	%	Cases	%
White	24	(47.1%)	534	(64.5%)	25	(56.8%)	1,666	(74.6%)
Black	23	(45.1%)	243	(29.3%)	17	(38.6%)	465	(20.8%)
Hispanic	3	(5.9%)	40	(4.8%)	1	(2.3%)	79	(3.5%)
Other/Unknown	1	(2.0%)	11	(1.3%)	1	(2.3%)	23	(1.0%)
Kansas City HIV Region Total	51	(100.0%)	828	(100.0%)	44	(100.0%)	2,233	(100.0%)

*HIV cases reported during 2001 which remained HIV cases at the end of that year.

Table 11. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Age Group, Kansas City HIV Region, Cumulative Through December 2001

Age Group	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
13-19	7	(1.3%)	14	(5.8%)	0	(0.0%)	23	(2.8%)
20-29	204	(38.2%)	108	(44.4%)	18	(45.0%)	333	(40.2%)
30-39	229	(42.9%)	90	(37.0%)	12	(30.0%)	334	(40.3%)
40-49	75	(14.0%)	25	(10.3%)	9	(22.5%)	112	(13.5%)
50+	19	(3.6%)	6	(2.5%)	1	(2.5%)	26	(3.1%)
Kansas City HIV Region Total	534	(100.0%)	243	(100.0%)	40	(100.0%)	828	(100.0%)

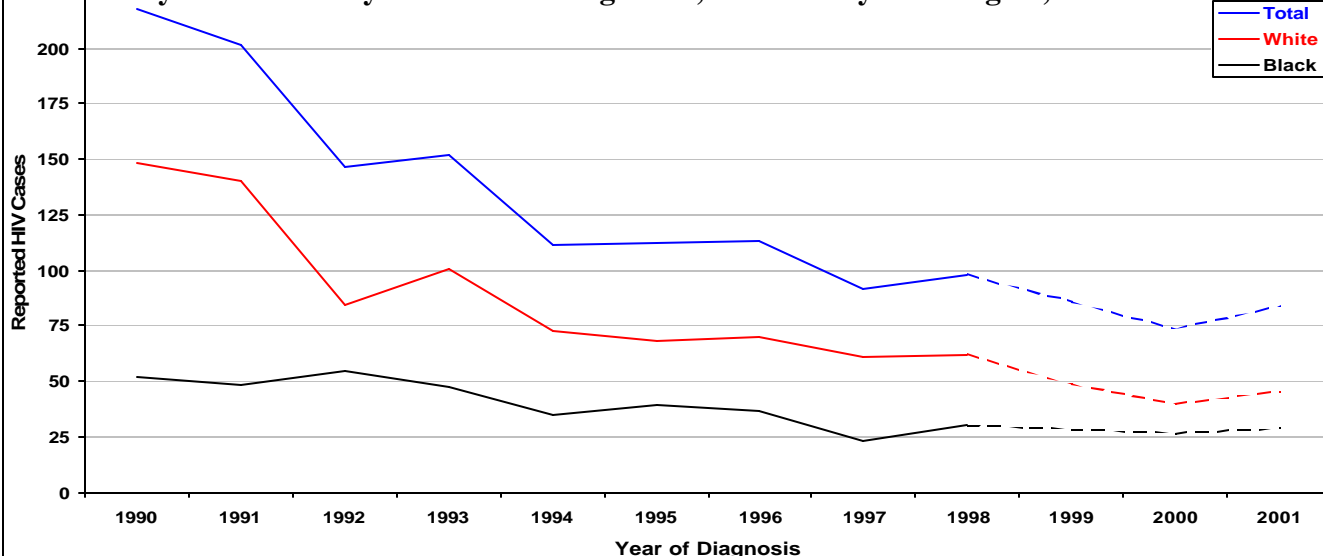
Table 12. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Geographic Area, Kansas City HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
Kansas City	425	(60.1%)	237	(33.5%)	37	(5.2%)	707	(100.0%)
Jackson County#	54	(85.7%)	5	(7.9%)	2	(3.2%)	63	(100.0%)
Clay County#	19	(95.0%)	0	(0.0%)	1	(5.0%)	20	(100.0%)
Cass County#	12	(100.0%)	0	(0.0%)	0	(0.0%)	12	(100.0%)
Remaining Counties	24	(92.3%)	1	(3.8%)	0	(0.0%)	26	(100.0%)
Kansas City HIV Region Total	534	(64.5%)	243	(29.3%)	40	(4.8%)	828	(100.0%)

#Outside the city limits of Kansas City.

NOTE: Row percentages are shown.

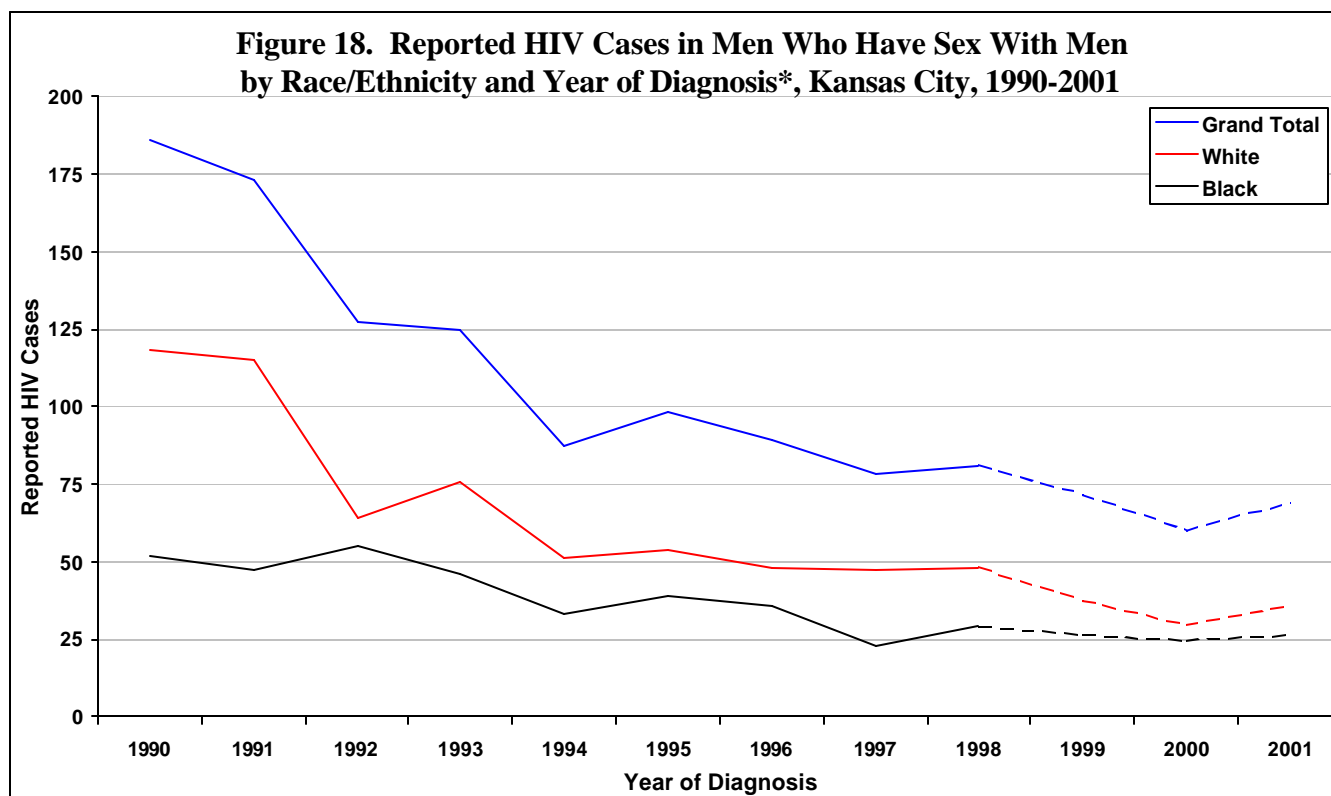
Figure 17. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Year of Diagnosis*, Kansas City HIV Region, 1990-2001



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Kansas City HIV Region

- For diagnosed HIV cases in MSM in Kansas City, the trends seen in recent years are similar to those for the region as a whole. the annual number of diagnosed cases generally decreased through the year 2000. In 2001, approximately 70 new cases in MSM are estimated to have been diagnosed, an increase of about 10 cases from the preceding year. See Figure 18.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

Men Who Have Sex With Men and Inject Drugs(MSM/IDU)

Magnitude of the Problem

- From 1982 through 2001, a total of 459 HIV Disease cases in men who have sex with men and inject drugs (MSM/IDUs) have been reported in Kansas City HIV Region residents (these cases make up 10.4% of all reported adult/adolescent HIV Disease cases in the region). Of these 459 HIV Disease Cases, 355 (77.3%) are AIDS cases and 104 (22.7%) are HIV cases.
- In 2001, 87 adult/adolescent AIDS cases were reported, 6 (6.9%) have, to date, been identified as MSM/IDUs. In 2001, of the 107 adult/adolescent HIV cases reported, 7 (6.5%) have, to date, been identified as MSM/IDUs.
- These numbers, however, do not completely indicate the full extent of MSM/IDU involvement since for 82 adult/adolescent AIDS cases, and 165 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 141). Here it is estimated that approximately 360 (11.7%) of the 3,071 total reported adult/adolescent AIDS cases were in MSM/IDUs. Likewise, it is estimated that approximately 113 (8.4%) of the 1,350 total reported adult/adolescent HIV cases were in MSM/IDUs.

Who

- Table 13 shows reported HIV and AIDS cases in MSM/IDUs by race/ethnicity.
- Of the 104 total reported HIV cases among MSM/IDUs, white men comprise 74.0% and black men make up 22.1%.
- White men comprise 71.8% of the 355 total reported AIDS cases among MSM/IDUs and black men make up 23.7%.
- Table 14 shows reported HIV cases in MSM/IDUs by race/ethnicity and age group. Among both white and black MSM/IDUs, the largest proportion of reported HIV cases (48.1% and 39.1%, respectively) were in men 30-39 years of age at the time of initial diagnosis.
- Information obtained through interviews with reported MSM/IDU HIV and AIDS cases indicates that at least 38% of these men (34% of white men and 48% of black men) have, in addition to having sex with other men, also had sex with females. (Note that these percentages may actually be higher because complete information may not have been obtained on all reported cases.)

Where

- Of the 104 total HIV cases reported in MSM/IDUs, 86 (82.7%) were from Kansas City, 10 (9.6%) from Jackson County[#], and 3 (2.9%) from Clay County[#]. The remaining cases were from the other counties in the HIV region (each of these counties reported less than 4 cases).
- Table 15 shows reported HIV cases in MSM/IDUs by race/ethnicity and geographic area. Of total MSM/IDU cases reported from Kansas City, black men made up 25.6%.

Trends

- The annual number of diagnosed HIV cases in MSM/IDUs decreased each year (with the exception of 1998) from 1991 to 2000. In 2001, approximately 11 new HIV cases are estimated to have been diagnosed in MSM/IDUs, an increase of about 7 cases from the preceding year. This increase appeared to have mostly occurred among white men. See Figure 19.
- The trends in diagnosed HIV cases in MSM/IDUs in Kansas City are generally the same as those for the region as a whole. It appears that most or all of the diagnosed cases in the region in 2001 were from Kansas City.

[#]Outside the city limits of Kansas City.

HIV Disease Epi Profile Summary: Kansas City HIV Region

Table 13. Reported HIV and AIDS Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity, Kansas City HIV Region, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Cases	%	Cases	%	Cases	%	Cases	%
White	6	(85.7%)	77	(74.0%)	2	(33.3%)	255	(71.8%)
Black	1	(14.3%)	23	(22.1%)	4	(66.7%)	84	(23.7%)
Hispanic	--	--	3	(2.9%)	--	--	11	(3.1%)
Other/Unknown	--	--	1	(1.0%)	--	--	5	(1.4%)
Kansas City HIV Region Total	7	(100.0%)	104	(100.0%)	6	(100.0%)	355	(100.0%)

*HIV cases reported during 2000 which remained HIV cases at the end of that year.

Table 14. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity and Age Group, Kansas City HIV Region, Cumulative Through December 2001

Age Group	White		Black		Total	
	Cases	%	Cases	%	Cases	%
13-19	3	(3.9%)	0	(0.0%)	3	(2.9%)
20-29	26	(33.8%)	9	(39.1%)	38	(36.5%)
30-39	37	(48.1%)	9	(39.1%)	46	(44.2%)
40-49	11	(14.3%)	5	(21.7%)	17	(16.3%)
50+	0	(0.0%)	0	(0.0%)	0	(0.0%)
Kansas City HIV Region Total	77	(100.0%)	23	(100.0%)	104	(100.0%)

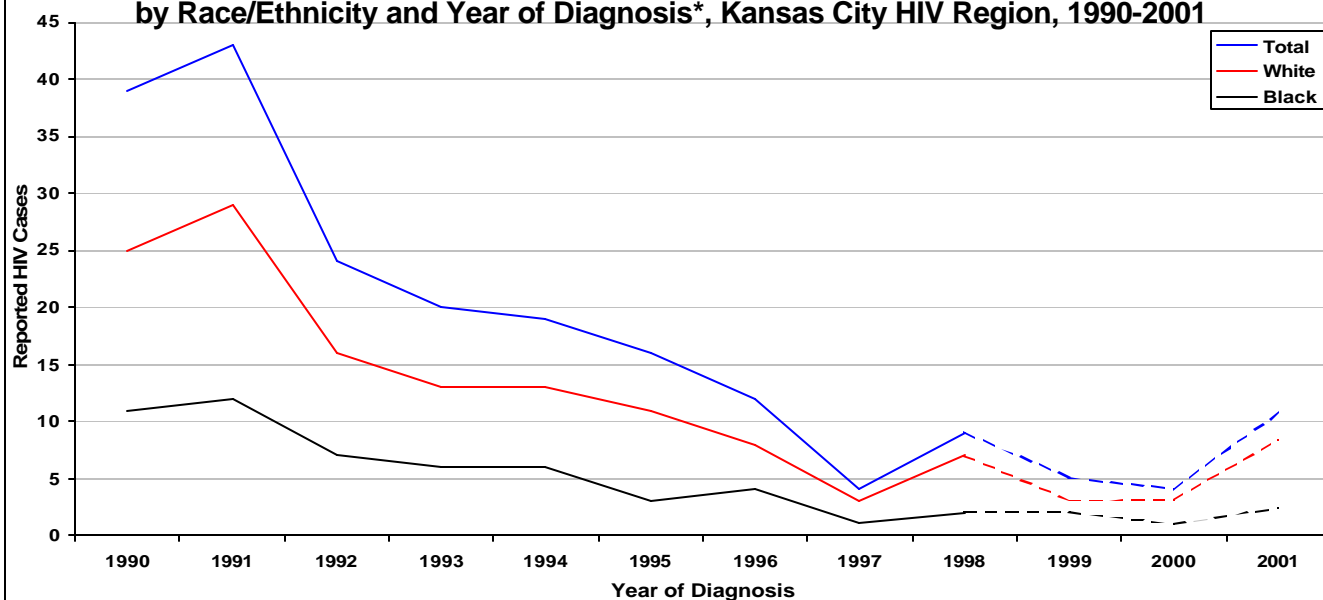
Table 15. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity and Geographic Area, Kansas City HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
Kansas City	60	(69.8%)	22	(25.6%)	3	(3.5%)	86	(100.0%)
Jackson County#	10	(100.0%)	0	(0.0%)	0	(0.0%)	10	(100.0%)
Clay County#	--	--	--	--	--	--	3	(100.0%)
Remaining Counties	--	--	--	--	--	--	5	(100.0%)
Kansas City HIV Region Total	77	(74.0%)	23	(22.1%)	3	(2.9%)	104	(100.0%)

#Outside the city limits of Kansas City.

NOTE: Row percentages are shown.

Figure 19. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity and Year of Diagnosis*, Kansas City HIV Region, 1990-2001



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

Injecting Drug Users (IDUs)

Magnitude of the Problem

- From 1982 through 2001, a total of 283 HIV Disease cases in injecting drug users (IDUs)[†] have been reported in Kansas City HIV Region residents (these cases make up 6.4% of all reported adult/adolescent HIV Disease cases in the region). Of these 283 HIV Disease cases, 187 (66.1%) are AIDS cases and 96 (33.9%) are HIV cases.
- In 2001, of the 87 adult/adolescent AIDS cases reported, 8 (9.2%) have, to date, been identified as IDUs. In 2001, of the 107 adult/adolescent HIV cases reported, none have, to date, been identified as IDUs.
- These numbers, however, do not indicate the full extent of IDU involvement since for 82 adult/adolescent AIDS cases, and 165 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 on page 141. Here it is estimated that approximately 199 (6.5%) of the 3,071 total reported adult/adolescent AIDS cases were IDUs. Likewise, it is estimated that approximately 106 (7.9%) of the 1,350 total reported adult/adolescent HIV cases were IDUs.

Who

- Table 16 shows reported HIV and AIDS cases in IDUs by race/ethnicity and gender.
- White males and black males each comprise 35.4% of the 96 total reported HIV cases among IDUs; black females make up 14.6%; white females 8.3%; Hispanic males 5.2% (5 cases); and Hispanic females 1.0% (1 case).
- Black males comprise 29.9% of the 187 total reported AIDS cases among IDUs; white males make up 29.4%; black females 18.2%; white females 15.5%; Hispanic males 5.3% (10 cases); and Hispanic females 1.1% (2 cases).
- Table 17 shows reported HIV cases in IDUs by race/ethnicity, gender, and age group. Among white female IDUs, the largest proportion of reported HIV cases (75.0%) were in persons 20-29 years of age at the time of initial diagnosis. Among white male, black male, and black female IDUs, the largest proportion of reported HIV cases (52.9%, 47.1%, and 57.1%, respectively) were in persons 30-39 years of age at the time of initial diagnosis.

Where

- Of the 96 total HIV cases reported in IDUs, 76 (79.2%) were from Kansas City, 10 (10.4%) from Jackson County[#], and 4 (4.2%) from Clay County[#]. The remaining 6 cases were from the other counties in the region.
- Table 18 shows reported HIV cases in IDUs by race/ethnicity and geographic area. Of total IDU HIV cases reported from Kansas City, blacks made up 60.5%.

Trends

- In recent years the annual number of diagnosed HIV cases in IDUs has generally been decreasing. In 2001, approximately 5 new HIV cases are estimated to have been diagnosed in IDUs.

[†]Each male IDU case denied any homosexual contact; if such contact were reported, the case would have been placed in the men who have sex with men and inject drugs [MSM/IDU] exposure category.

[#]Outside the city limits of Kansas City.

HIV Disease Epi Profile Summary: Kansas City HIV Region

Table 16. Reported HIV and AIDS Cases in Injecting Drug Users by Race/Ethnicity and Gender, Kansas City HIV Region, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Cases	%	Cases	%	Cases	%	Cases	%
White Male	0	(0.0%)	34	(35.4%)	2	(25.0%)	55	(29.4%)
Black Male	0	(0.0%)	34	(35.4%)	3	(37.5%)	56	(29.9%)
Hispanic Male	0	(0.0%)	5	(5.2%)	1	(12.5%)	10	(5.3%)
White Female	0	(0.0%)	8	(8.3%)	0	(0.0%)	29	(15.5%)
Black Female	0	(0.0%)	14	(14.6%)	1	(12.5%)	34	(18.2%)
Hispanic Female	0	(0.0%)	1	(1.0%)	1	(12.5%)	2	(1.1%)
Kansas City HIV Region Total	0	(100.0%)	96	(100.0%)	8	(100.0%)	187	(100.0%)

*HIV cases reported during 2001 which remained HIV cases at the end of that year.

Table 17. Reported HIV Cases in Injecting Drug Users by Race/Ethnicity, Gender, and Age Group, Kansas City HIV Region, Cumulative Through December 2001

Age Group	White Males		Black Males		White Females		Black Females		Total	
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
13–19	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
20–29	11	(32.4%)	10	(29.4%)	6	(75.0%)	4	(28.6%)	32	(33.3%)
30–39	18	(52.9%)	16	(47.1%)	1	(12.5%)	8	(57.1%)	47	(49.0%)
40–49	3	(8.8%)	6	(17.6%)	1	(12.5%)	2	(14.3%)	13	(13.5%)
50+	2	(5.9%)	2	(5.9%)	0	(0.0%)	0	(0.0%)	4	(4.2%)
Kansas City HIV Region Total ..	34	(100.0%)	34	(100.0%)	8	(100.0%)	14	(100.0%)	96	(100.0%)

Table 18. Reported HIV Cases in Injecting Drug Users by Race/Ethnicity and Geographic Area, Kansas City HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
Kansas City	25	(32.9%)	46	(60.5%)	5	(6.6%)	76	(100.0%)
Jackson County#	9	(90.0%)	1	(10.0%)	0	(0.0%)	10	(100.0%)
Clay County#	2	(50.0%)	1	(25.0%)	1	(25.0%)	4	(100.0%)
Remaining Counties	6	(100.0%)	0	(0.0%)	0	(0.0%)	6	(100.0%)
Kansas City HIV Region Total	42	(43.8%)	48	(50.0%)	6	(6.3%)	96	(100.0%)

#Outside the city limits of Kansas City.

NOTE: Row percentages are shown.

Heterosexual Contacts

Magnitude of the Problem

- From 1982 through 2001, a total of 315 HIV Disease cases in heterosexual contacts have been reported in Kansas City HIV Region residents (these cases make up 7.1% of all reported adult/adolescent HIV Disease cases in the region). Of these 315 HIV Disease cases, 167 (53.0%) are AIDS cases and 148 (47.0%) are HIV cases.
- In 2001, of the 87 adult/adolescent AIDS cases reported, 13 (14.9%) have, to date, been identified as being in heterosexual contacts. In 2001, of the 107 adult/adolescent HIV cases reported, 13 (12.1%) have, to date, been identified as being in heterosexual contacts.
- These numbers, however, do not indicate the full extent of heterosexual contact involvement since for 82 adult/adolescent AIDS cases, and 165 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the “Other/Unknown” exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with “Other/Unknown” cases whose exposure category was determined following investigation, the result would be that seen in Table 2 on page 141. Here it is estimated that approximately 189 (6.2%) of the 3,071 total reported adult/adolescent AIDS cases [and approximately 18 (20.7%) of the 87 adult/adolescent AIDS cases reported in 2001] were in heterosexual contacts. Likewise, it is estimated that approximately 194 (14.4%) of the 1,350 total reported adult/adolescent HIV cases [and approximately 21 (19.6%) of the 107 adult/adolescent HIV cases reported in 2001] were in heterosexual contacts.

Who

- Table 19 shows reported HIV and AIDS cases in heterosexual contacts by race/ethnicity and gender.
- Black females comprise 49.3% of the 148 total reported HIV cases among heterosexual contacts; white females 35.1%; black males 8.1%; and white males 2.1%.
- Black females comprise 44.9% of the 167 total reported AIDS cases among heterosexual contacts; white females make up 34.1%; black males 11.4%; and white males 4.2%.
- Table 20 shows reported HIV cases in heterosexual contacts by race/ethnicity, gender, and age group. Among white female and black female heterosexual contacts, the largest proportion of reported HIV cases (50.0% and 42.5%, respectively) were in women 20-29 years of age at the time of initial diagnosis. Among black male heterosexual contacts, the largest proportion of reported HIV cases (50.0%) were in men 20-29 years of age at the time of diagnosis.

Where

- Of the 148 total HIV cases reported in heterosexual contacts, 117 (79.1%) were from Kansas City, 10 (6.8%) from Jackson County[#], 6 (4.1%) from Clay County[#], and 4 (2.7%) each from Lafayette and Platte[#] Counties. Seven other cases were reported from the other counties in the region.
- Table 21 shows reported HIV cases in heterosexual contacts by race/ethnicity and geographic area. Of total heterosexual contact cases reported from Kansas City, blacks made up 68.4%.

Trends

- Since the mid-1990s, the annual number of diagnosed HIV cases in heterosexual contacts has remained plateaued in the general range of 25-35 cases per year. This trend is seen in both white and black cases in the region, and for diagnosed cases reported only from Kansas City. See Figures 20 to 23.
- As indicated in Table 2 (on page 141), a higher proportion of cumulative HIV cases (14.4%), compared to cumulative AIDS cases (6.2%), appear to be heterosexual contacts, providing evidence that among more recently infected persons a larger proportion are heterosexual contacts.

[#]Outside the city limits of Kansas City.

HIV Disease Epi Profile Summary: Kansas City HIV Region

Table 19. Reported HIV and AIDS Cases in Heterosexual Contacts by Race/Ethnicity and Gender, Kansas City HIV Region, Reported 2001*, and Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases				AIDS Cases			
	Reported 2001*		Cumulative		Reported 2001		Cumulative	
	Cases	%	Cases	%	Cases	%	Cases	%
White Male	0	(0.0%)	4	(2.7%)	1	(7.7%)	7	(4.2%)
Black Male	0	(0.0%)	12	(8.1%)	1	(7.7%)	19	(11.4%)
White Female	6	(46.2%)	52	(35.1%)	3	(23.1%)	57	(34.1%)
Black Female	7	(53.8%)	73	(49.3%)	7	(53.8%)	75	(44.9%)
Kansas City HIV Region Total	13	(100.0%)	148	(100.0%)	13	(100.0%)	167	(100.0%)

*HIV cases reported during 2001 which remained HIV cases at the end of that year.

Table 20. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity, Gender, and Age Group, Kansas City HIV Region, Cumulative Through December 2001

Age Group	White Males		Black Males		White Females		Black Females		Total	
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
13-19	--	--	1	(8.3%)	3	(5.8%)	7	(9.6%)	11	(7.4%)
20-29	--	--	6	(50.0%)	26	(50.0%)	31	(42.5%)	66	(44.6%)
30-39	--	--	3	(25.0%)	16	(30.8%)	24	(32.9%)	45	(30.4%)
40-49	--	--	1	(8.3%)	3	(5.8%)	9	(12.3%)	19	(12.8%)
50+	--	--	1	(8.3%)	4	(7.8%)	2	(2.7%)	7	(4.7%)
Kansas City Region Total	4	(100.0%)	12	(100.0%)	52	(100.0%)	73	(100.0%)	148	(100.0%)

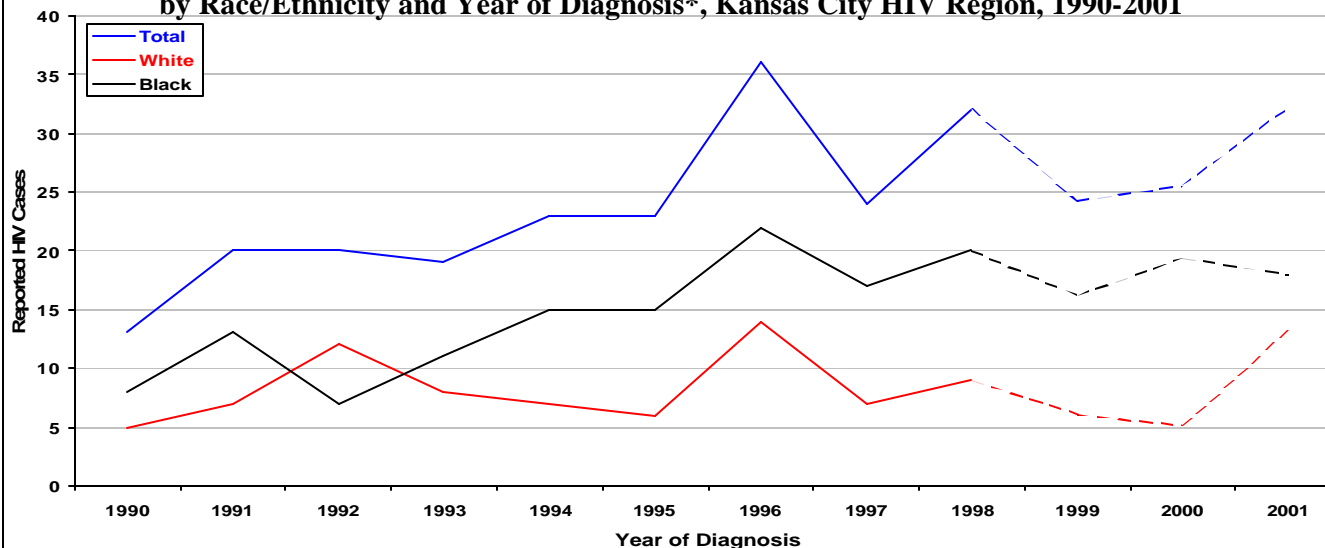
Table 21. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Geographic Area, Kansas City HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Hispanic		Total	
	Cases	%	Cases	%	Cases	%	Cases	%
Kansas City	31	(26.5%)	80	(68.4%)	4	(3.4%)	117	(100.0%)
Jackson County#	6	(60.0%)	3	(30.0%)	--	--	10	(100.0%)
Clay County#	6	(100.0%)	--	--	--	--	6	(100.0%)
Lafayette County	4	(100.0%)	--	--	--	--	4	(100.0%)
Platte County#	4	(100.0%)	--	--	--	--	4	(100.0%)
Remaining Counties	5	(71.4%)	--	--	--	--	7	(100.0%)
Kansas City HIV Region Total	56	(37.8%)	85	(57.4%)	5	(3.4%)	148	(100.0%)

#Outside the city limits of Kansas City.

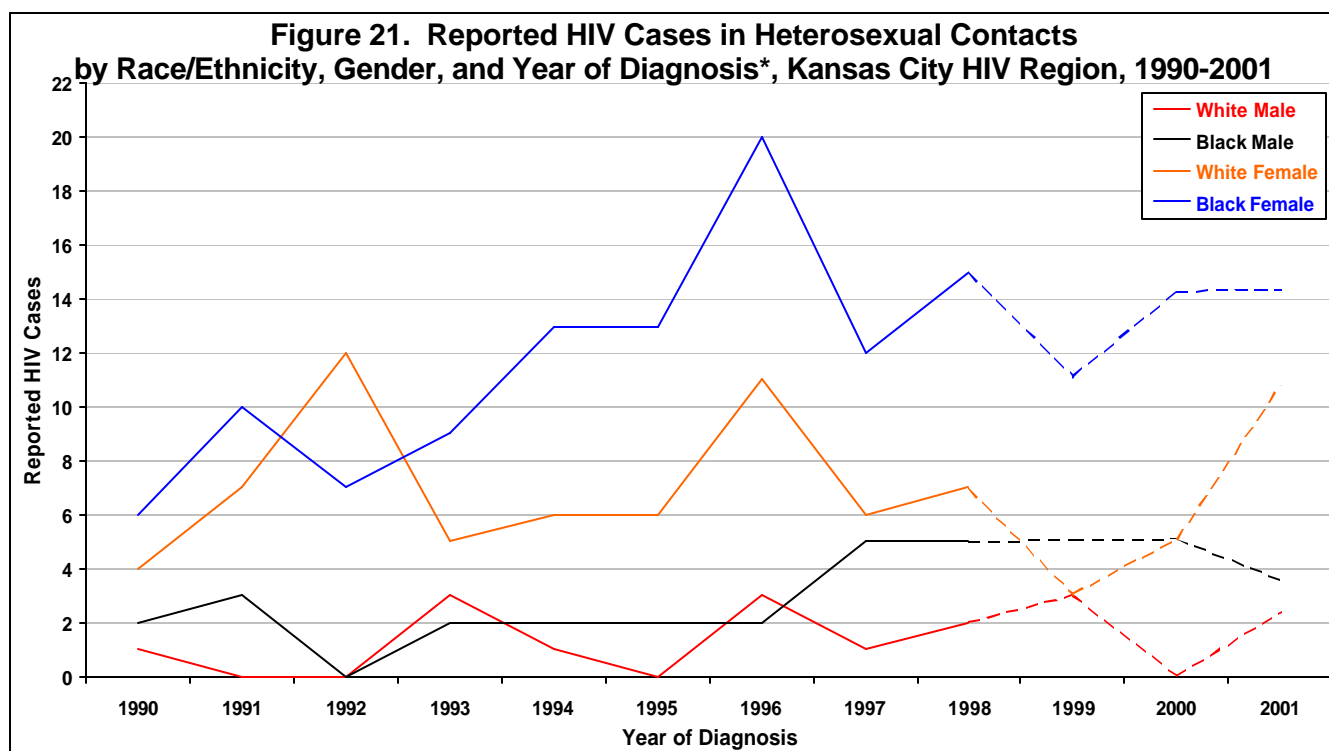
NOTE: Row percentages are shown.

Figure 20. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Year of Diagnosis*, Kansas City HIV Region, 1990-2001

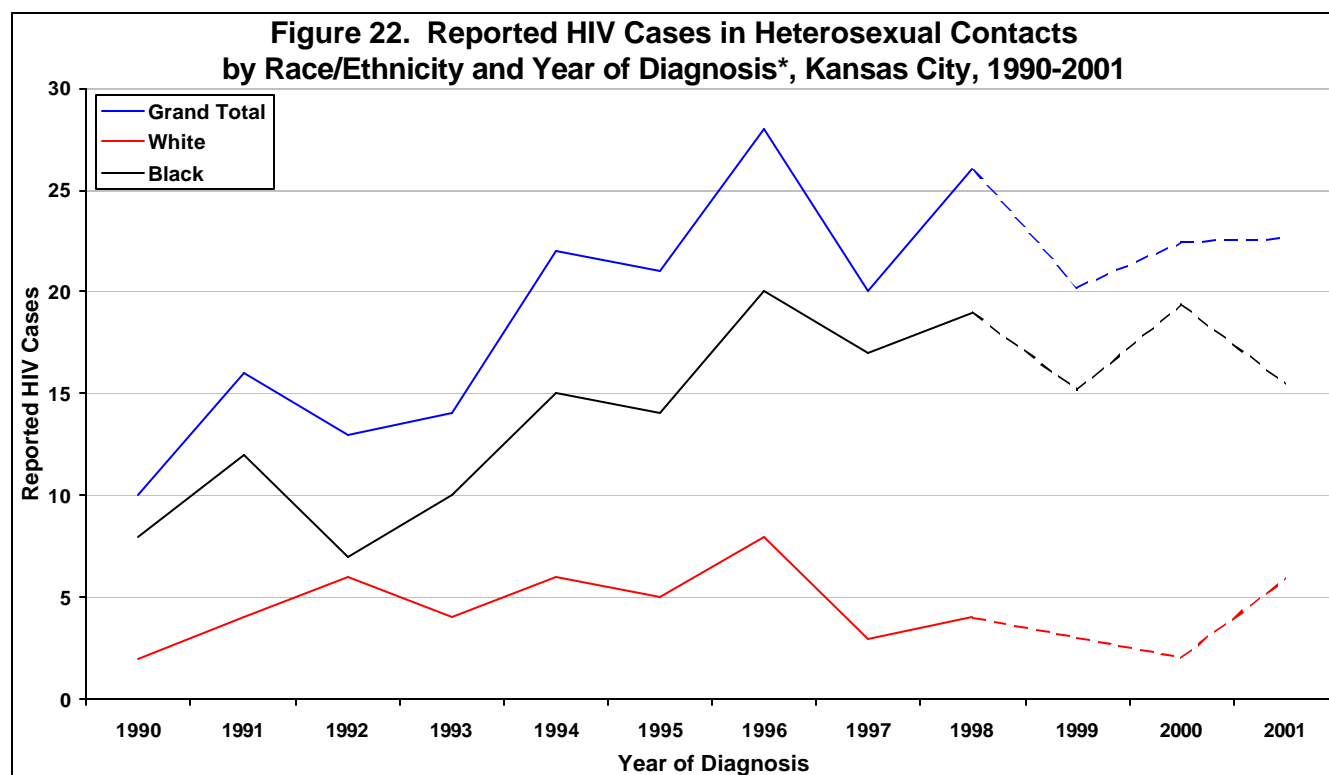


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Kansas City HIV Region

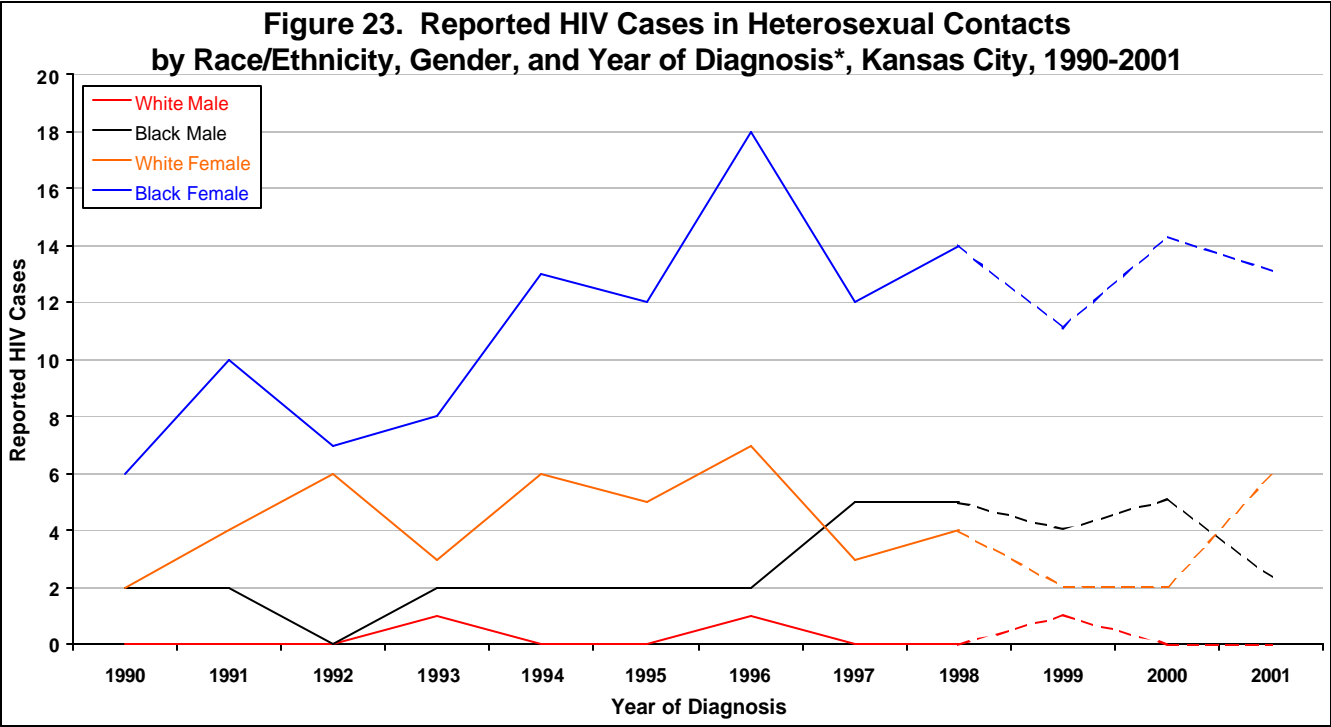


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Kansas City HIV Region



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

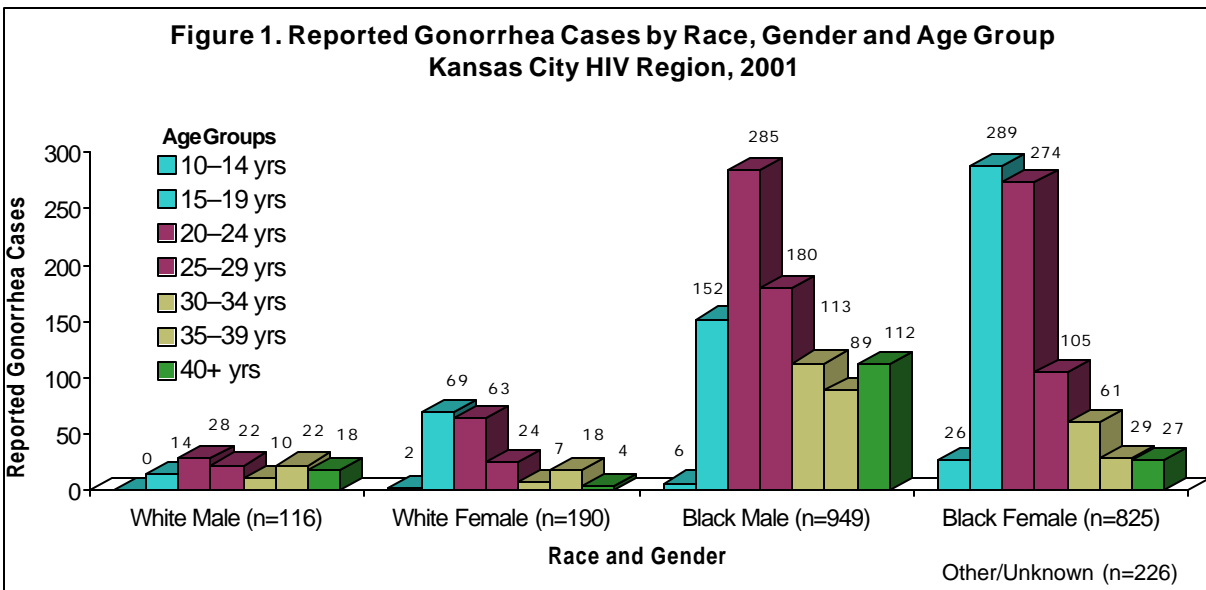
Gonorrhea

Magnitude of the Problem

- During 2001, 2,306 cases of gonorrhea were reported in the Kansas City HIV Region; the corresponding rate* was 200.7 cases per 100,000 population. Because of underdiagnosis and underreporting, the actual number of persons infected with *Neisseria gonorrhoeae* was undoubtedly much higher.

Who

- Of the 2,306 gonorrhea cases reported in 2001, 1,174 (50.9%) were in males and 1,132 (49.1%) in females. Among whites, a higher proportion of cases were reported in females (62.1%) than in males (37.9%). Among blacks, a higher proportion of cases were reported in males (53.5%) than in females (46.5%).
- Of the 2,306 gonorrhea cases reported in 2001, 306 (13.3%) were in whites and 1,774 (76.9%) were in blacks. Twelve (0.5%) cases were in other racial groups, and for 214 (9.3%) cases, race was unknown.
- The rate* of reported cases in blacks (1,022.6) was about 31 times the rate* in whites (33.3).
- Table 1 on page 165 shows the numbers and rates of reported gonorrhea cases by race.
- Of the 2,306 gonorrhea cases reported in 2001, 624 (27.1%) were in teenagers. Teenagers made up 313 (37.9%) of the 825 black female cases, 71 (37.4%) of the 190 white female cases, 158 (16.6%) of the 949 black male cases, and 14 (12.1%) of the 116 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 2,306 gonorrhea cases reported, 2,024 (87.8%) were from Kansas City, 176 (7.6%) from Jackson County, and 30 (1.3%) from Clay County. The remaining counties in the region each had from 3-25 cases reported. Cases were reported from 8 of the region's 10 counties. Table 2 shows the numbers and percentages of cases reported from the counties with the largest numbers of cases (as well as from Kansas City). Figure 2 is a map showing reported cases by zip code area for Clay, Jackson, and Platte Counties.
- The highest rate* of reported gonorrhea cases in 2001 was in Kansas City (462.3). Table 2 shows rates of reported cases for the region's counties. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported gonorrhea cases by race from 1992-2001. The 2,306 gonorrhea cases reported in 2001 represented a 18.5% decrease from the 2,831 cases reported in 2000.

* Per 100,000 population

STD Epi Profile Summary: Kansas City HIV Region

Table 1. Reported Gonorrhea Cases and Rates by Race, Kansas City HIV Region, 2001

	Cases	%	Rate*
Whites	306	13.3%	33.3
Blacks	1,774	76.9%	1,022.6
Other/Unknown	226	9.8%	—
Total Cases	2,306	100.0%	200.7

Table 2. Reported Gonorrhea Cases and Rates by County, Kansas City HIV Region, 2001

	Cases	%	Rate*
Kansas City	2,024	87.8%	462.3
Jackson	176	7.6%	55.1
Clay	30	1.3%	28.5
Johnson	25	1.1%	52.0
Cass	16	0.7%	16.8
Platte	16	0.7%	48.7
Lafayette	13	0.6%	39.6
Total Cases	2,306	100.0%	200.7

*Per 100,000 population

Figure 2. Reported Gonorrhea Cases by Zip Code Area, Clay, Jackson and Platte Counties, 2001

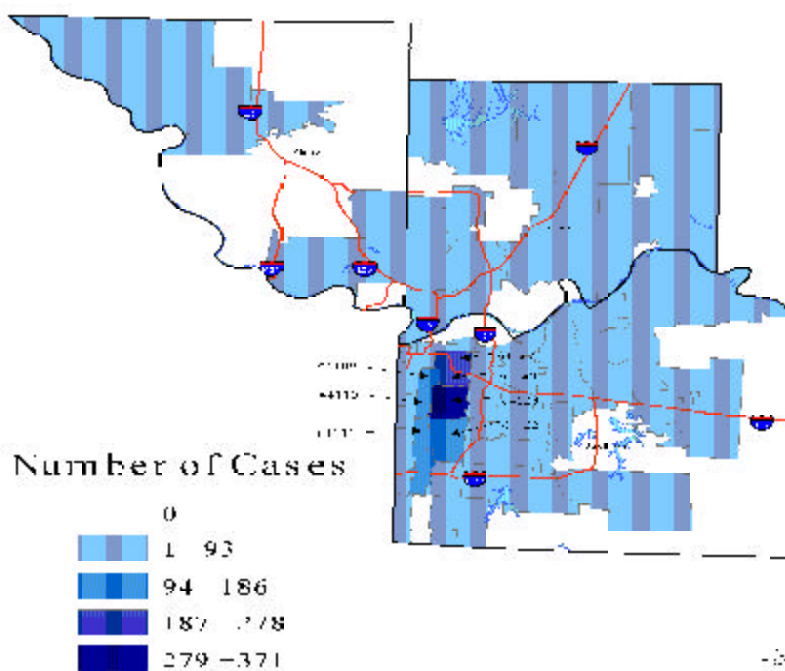


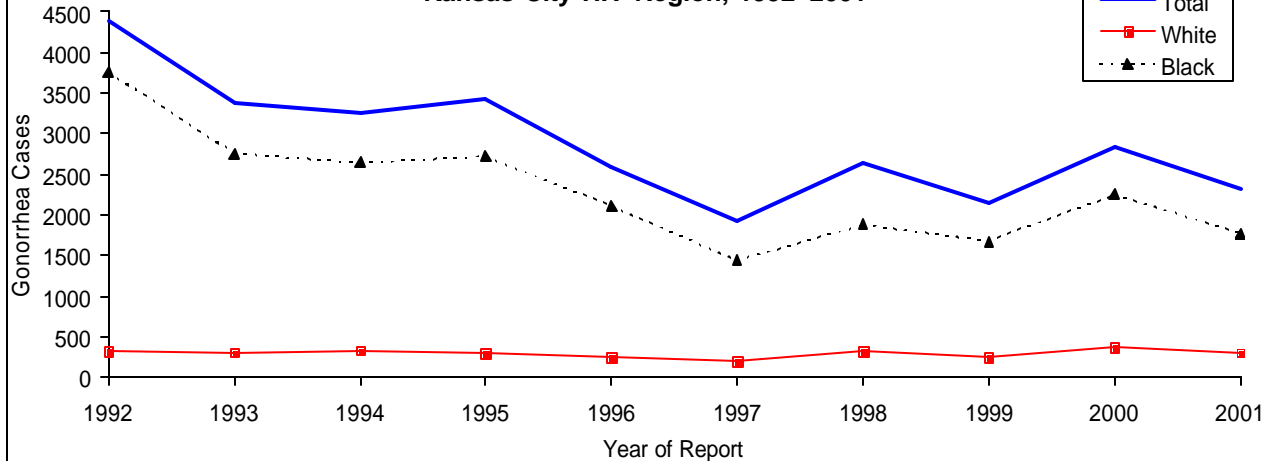
Table 3. Reported Gonorrhea Cases and Rates by Race and County, Kansas City HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Kansas City	2,024	100.0%	462.3	181	8.9%	64.8	1,672	82.6%	1284.3
Jackson County	176	100.0%	55.1	69	39.2%	--	73	41.5%	--
Clay County	30	100.0%	28.5	14	46.7%	--	5	16.7%	--
Johnson County	25	100.0%	52.0	15	60.0%	35.2	7	28.0%	223.1
Platte County	16	100.0%	36.5	10	62.5%	--	3	18.8%	--
Cass County	14	100.0%	16.8	11	78.6%	13.8	2	14.3%	185.9
Lafayette County	13	100.0%	39.6	6	46.2%	19.3	4	30.8%	357.5
Kansas City HIV Region	2,306	100.0%	200.7	306	13.3%	33.3	1,774	76.9%	1022.6

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

Figure 3. Reported Gonorrhea Cases by Race and Year of Report, Kansas City HIV Region, 1992–2001



STD Epi Profile Summary: Kansas City HIV Region

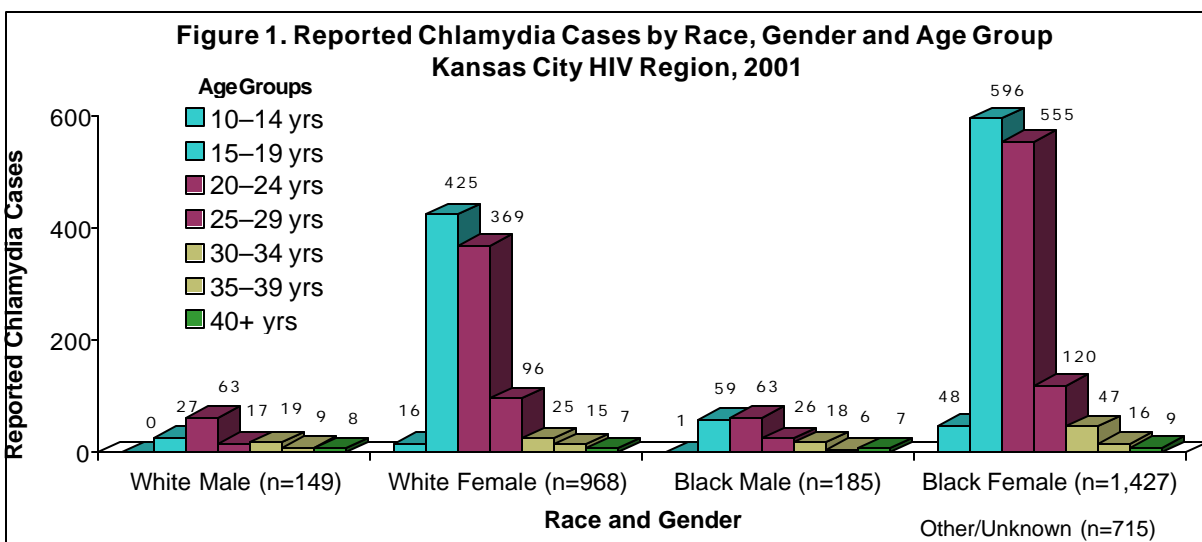
Chlamydia

Magnitude of the Problem

- During 2001, 3,444 cases of chlamydia were reported in the Kansas City HIV Region; the corresponding rate* was 299.8 cases per 100,000 population. Because of underdiagnosed and underreporting, the actual number of persons infected with *Chlamydia Trachomatis* was undoubtedly much higher.

Who

- Of the 3,444 chlamydia cases reported in 2001, 488 (14.2%) were in males and 2,956 (85.8%) were in females. This reflects the selective screening of females for chlamydia undertaken by the Missouri Infertility Prevention Project (MIPP). If similar widespread screening of males were also undertaken, it is expected that the number of diagnosed and reported cases in males would be much higher than is currently seen.
- Of the 3,444 chlamydia cases reported in 2001, 1,117 (32.4%) were in whites and 1,612 (46.8%) were in blacks. One hundred twenty-six (3.7%) cases were in other racial groups, and for 589 (17.1%) cases, race was unknown.
- The rate* of reported cases in blacks (929.2) was about 8 times the rate* in whites (121.6).
- Table 1 on page 167 shows the numbers and rates of reported chlamydia cases by race.
- Of the 3,444 chlamydia cases reported in 2001, 1,423 (41.3%) were in teenagers. Teenagers made up 642 (45.0%) of the 1,427 black female cases, 441 (45.6%) of the 968 white female cases, 60 (32.4%) of the 185 black male cases, and 27 (18.1%) of the 149 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 3,444 chlamydia cases reported, 2,367 (68.7%) were from Kansas City, 508 (14.8%) from Jackson County, 199 (5.8%) from Clay County, and 140 (4.1%) from Johnson County. The remaining counties in the region each had from 8-71 cases reported. Cases were reported from all of the region's counties. Table 2 shows the number and percentage of cases reported from those counties having the largest numbers of cases. Figure 2 is a map showing cases by zip code area for Clay, Jackson, and Platte Counties.
- The highest rate* of reported chlamydia cases in 2001 was in Kansas City (540.7). Table 2 shows rates of reported cases for counties with the most cases. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported chlamydia cases by race from 1992-2001. The 3,444 cases reported in 2001 represented a 6.4% decrease from the 3,681 cases reported in 2000.

* Per 100,000 population

STD Epi Profile Summary: Kansas City HIV Region

Table 1. Reported Chlamydia Cases and Rates by Race, Kansas City HIV Region, 2001

	Cases	%	Rate*
Whites	1,117	32.4%	121.6
Blacks	1,612	46.8%	929.2
Other/Unknown	715	20.8%	—
Total Cases	3,444	100.0%	299.8

Table 2. Reported Chlamydia Cases and Rates by County, Kansas City HIV Region, 2001

	Cases	%	Rate*
Kansas City	2,367	68.7%	540.7
Jackson	508	14.8%	159.0
Clay	199	5.8%	189.2
Johnson	140	4.1%	291.3
Cass	71	2.1%	85.4
Lafayette	51	1.5%	155.4
Platte	51	1.5%	116.5
Ray	23	0.7%	96.8
Total Cases	3,444	100.0%	299.8

*Per 100,000 population

Figure 2. Reported Chlamydia Cases by Zip Code Area, Clay, Jackson, and Platte Counties, 2001

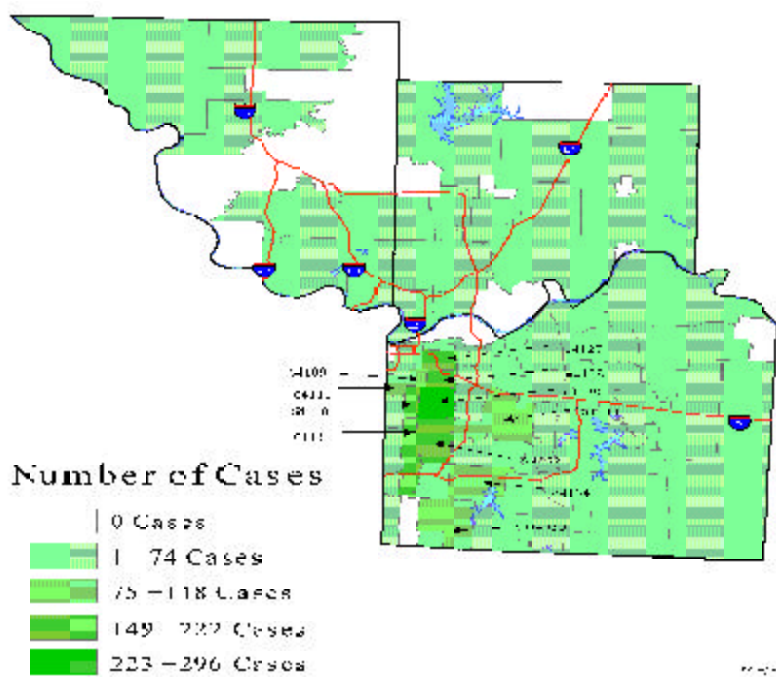


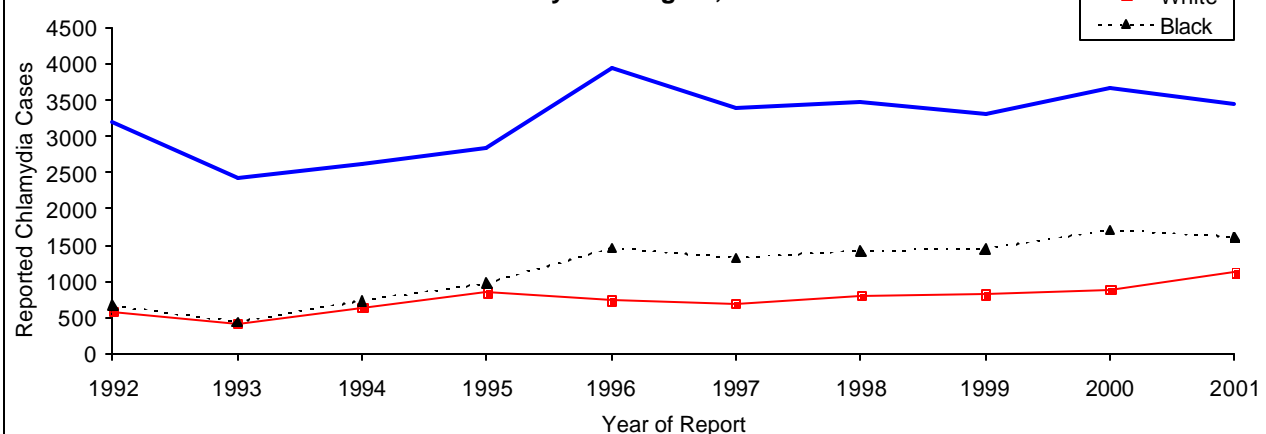
Table 3. Reported Chlamydia Cases and Rates by Race and County, Kansas City HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Kansas City	2,367	100.0%	540.7	458	19.3%	164.0	1,453	61.4%	1116.1
Jackson County	508	100.0%	159.0	300	59.1%	—	96	18.9%	—
Clay County	199	100.0%	189.2	108	54.3%	—	11	5.5%	—
Johnson County	140	100.0%	291.3	76	54.3%	178.3	36	15.7%	1147.6
Cass County	71	100.0%	85.4	49	69.0%	61.6	7	9.8%	650.6
Lafayette County	51	100.0%	155.4	36	70.6%	115.5	5	9.8%	446.8
Platte County	51	100.0%	116.5	44	86.3%	—	2	3.9%	—
Kansas City HIV Region	3,444	100.0%	299.8	1,117	32.4%	121.6	1,612	46.8%	929.2

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

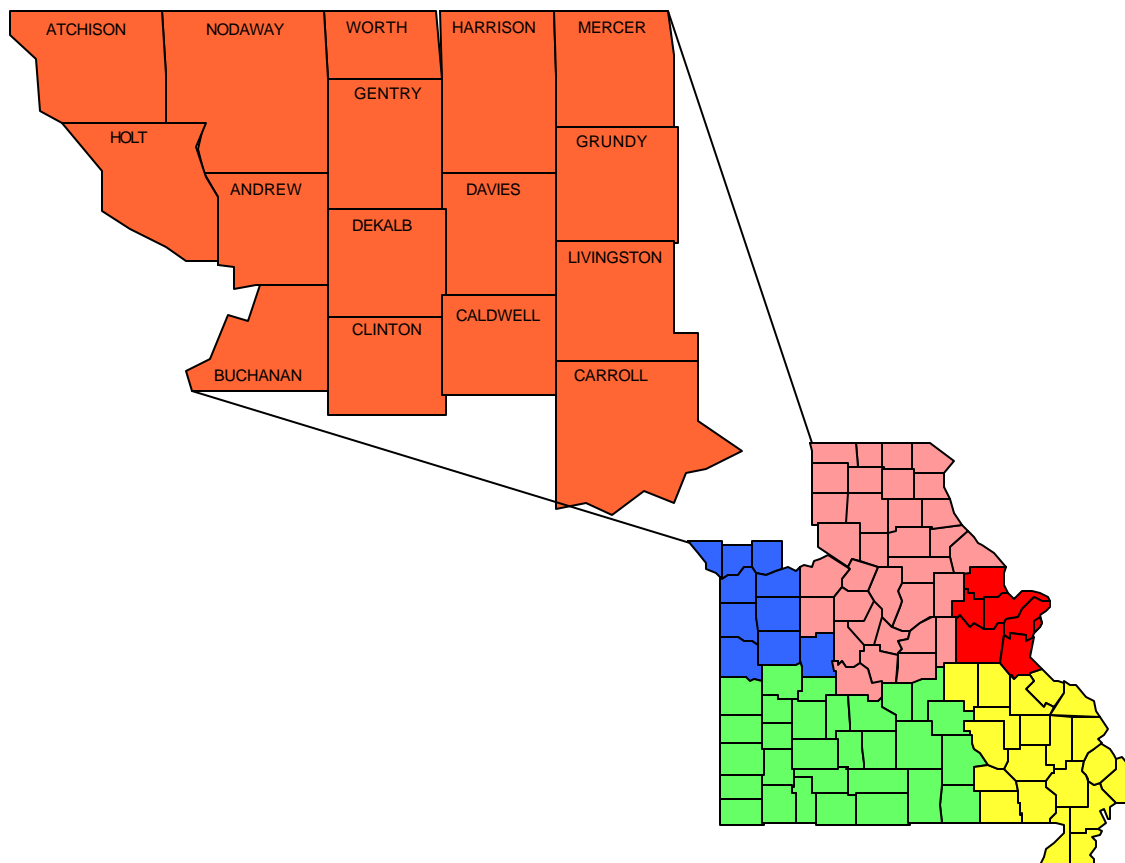
Figure 3. Reported Chlamydia Cases by Race and Year of Report, Kansas City HIV Region, 1992–2001



STD Epi Profile Summary: Kansas City HIV Region

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Northwest HIV Region



1999 Population Estimates for the Northwest HIV Region

County	White		African American		American Indian		Asian/Pacific Is		Hispanic		Total	
Andrew County	15,318	98.3%	33	0.2%	40	0.3%	34	0.2%	160	1.0%	15,585	100.0%
Atchison County	6,782	96.6%	90	1.3%	14	0.2%	16	0.2%	119	1.7%	7,021	100.0%
Buchanan County	75,600	92.6%	3,068	3.8%	202	0.2%	367	0.4%	2,398	2.9%	81,635	100.0%
Caldwell County	8,803	98.6%	17	0.2%	19	0.2%	2	0.0%	85	1.0%	8,926	100.0%
Carroll County	9,781	96.8%	254	2.5%	10	0.1%	16	0.2%	47	0.5%	10,108	100.0%
Clinton County	18,699	95.8%	482	2.5%	79	0.4%	40	0.2%	222	1.1%	19,522	100.0%
Daviess County	7,941	98.6%	3	0.0%	22	0.3%	19	0.2%	66	0.8%	8,051	100.0%
DeKalb County	9,797	86.8%	999	8.9%	95	0.8%	52	0.5%	345	3.1%	11,288	100.0%
Gentry County	6,796	98.9%	7	0.1%	25	0.4%	7	0.1%	37	0.5%	6,872	100.0%
Grundy County	9,953	98.2%	9	0.1%	44	0.4%	31	0.3%	97	1.0%	10,134	100.0%
Harrison County	8,303	98.7%	9	0.1%	29	0.3%	25	0.3%	47	0.6%	8,413	100.0%
Holt County	5,508	99.0%	9	0.2%	19	0.3%	6	0.1%	20	0.4%	5,562	100.0%
Livingston County	13,450	95.9%	418	3.0%	40	0.3%	35	0.2%	81	0.6%	14,024	100.0%
Mercer County	3,934	99.4%	5	0.1%	6	0.2%	2	0.1%	9	0.2%	3,956	100.0%
Nodaway County	19,943	97.1%	191	0.9%	31	0.2%	193	0.9%	173	0.8%	20,531	100.0%
Worth County	2,273	99.0%	4	0.2%	1	0.0%	6	0.3%	11	0.5%	2,295	100.0%
Region Totals	222,881	95.3%	5,598	2.4%	676	0.3%	851	0.4%	3,917	1.7%	233,923	100.0%

Source: U.S. Census Bureau

HIV Disease Epi Profile Summary: Northwest HIV Region

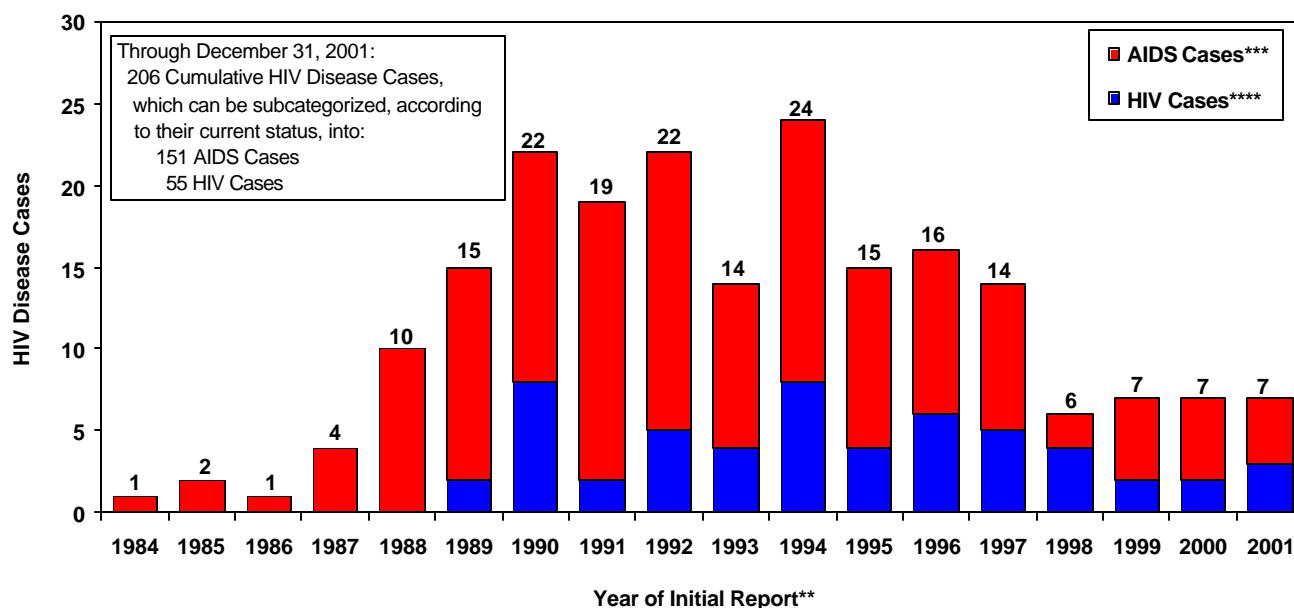
Magnitude and Impact of the Problem

- From 1984 through 2001, a total of 206 HIV Disease cases have been reported in residents of the Northwest HIV Region. In 2001, 7 new HIV Disease cases were reported for the first time to public health officials. Figure 1 shows reported HIV Disease cases by current status (HIV case vs. AIDS case) and year of initial report (i.e., the year in which the first report of the person, whether as an HIV case or an AIDS case, was received). (See also the section entitled “**Trends**” on page 173.)
- Of these 206 HIV Disease cases, 151 (73.3%) have met the case definition for AIDS and are thus categorized as AIDS cases; 82 (54.3%) of the 151 reported AIDS cases are known to have died, and 69 (45.7%) are living.
- In 2001, 7 AIDS cases were reported. Figure 2 (on page 171) shows persons (living and deceased) diagnosed with AIDS by year of report (see also the section entitled “**Trends**” on page 173).
- Of the 206 reported HIV Disease cases, 55 (26.7%) have not met the case definition for AIDS, and are thus categorized as HIV cases; 3 HIV cases* were reported in 2001.

* When reference is made to HIV cases reported in 2001, this means HIV cases reported during that year which remained HIV cases at the end of the year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included (instead, they are included among the AIDS cases reported in 2001).



Figure 1. Reported HIV Disease Cases by Current Status* and Year of Initial Report**
Northwest HIV Region, 1984-2001



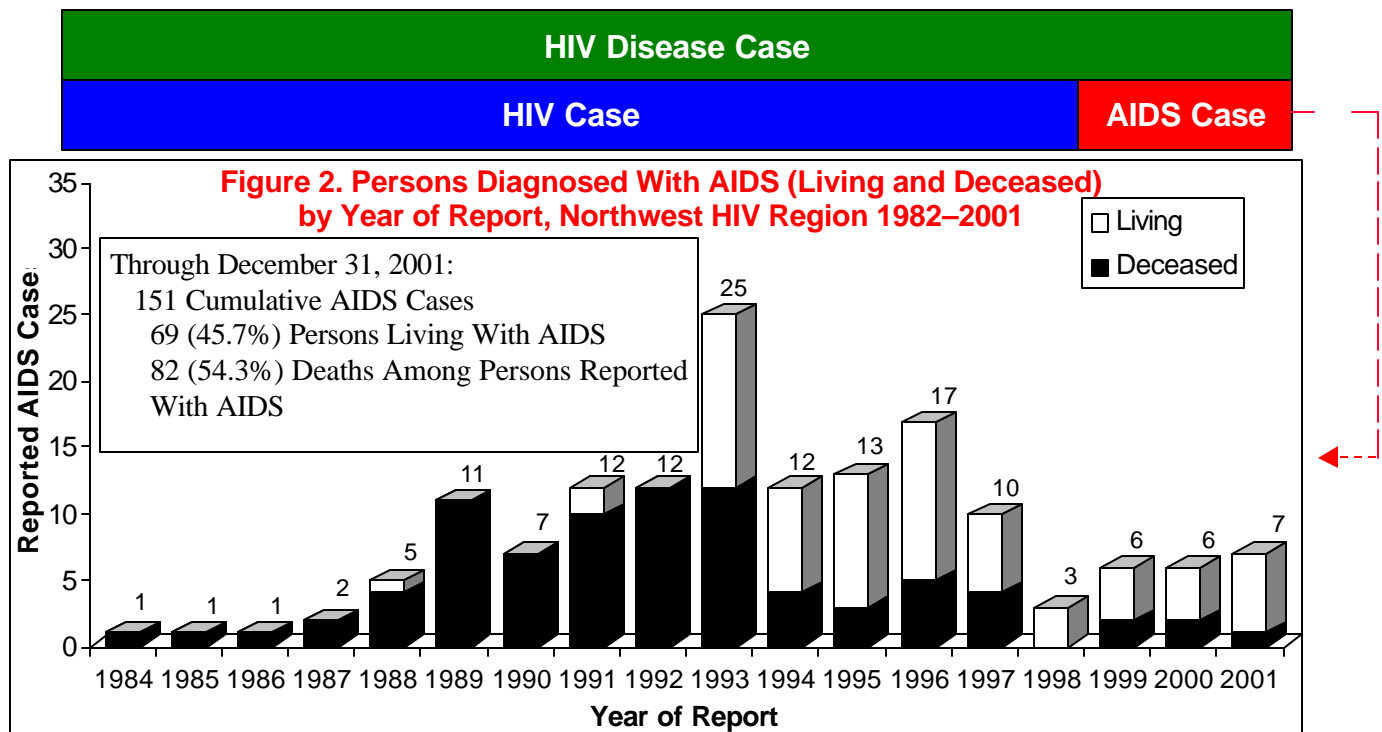
*HIV Cases vs. AIDS Cases

**Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)

***These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition; or 2) initially reported as an AIDS case.

****These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

HIV Disease Epi Profile Summary: Northwest HIV Region



Who

- Table 1 describes HIV cases, AIDS cases, and HIV Disease cases by gender, race/ethnicity, and age at diagnosis.
- Males comprised 81.8% of the 55 cumulative reported HIV cases and 89.4% of the 151 cumulative reported AIDS cases.
- Most of the reported HIV and AIDS cases in the region are white* (90.9% of HIV cases and 90.1% of AIDS cases). However, although total numbers of black* cases have been small (4 HIV cases and 14 AIDS cases), blacks appear somewhat disproportionately represented among reported cases. This is indicated by the fact that blacks comprise only about 2.4% of the region's population, but have accounted for 7.3% of reported HIV cases and 9.3% of reported AIDS cases.
- Of the 10 reported female HIV cases, 3 (30.0%) were in black females. Of the 16 reported female AIDS cases, 3 (18.8%) were in black females.
- The numbers of total reported HIV Disease cases in Hispanics and American Indians have been extremely small.
- Of the 55 reported HIV cases, 38.2% were diagnosed in 20-29 year olds, 29.1% in 30-39 year olds, 14.5% in 40-49 year olds, 9.1% in persons 50 years of age and older, and 9.1% (5 cases) in 13-19 year olds. These data indicate that a sizeable proportion of infections are occurring in persons in their twenties, and that infections are occasionally occurring in teenagers.
- Of the 55 reported adult/adolescent HIV cases: 31 (56.4%) were in men who have sex with men (MSM); 6 (10.9%) in men who have sex with men and inject drugs (MSM/IDUs); 4 (7.3%) in injecting drug users (IDUs); 11 (20.0%) in heterosexual contacts; 1 (1%) in a hemophiliac; and 2 (3.6%) are still being investigated and have not yet been placed in a specific exposure category.
- Of the 151 reported adult/adolescent AIDS cases: 96 (63.6%) were in MSM; 14 (9.3%) in MSM/IDUs; 11 (7.3%) in IDUs; 10 (6.6%) in heterosexual contacts; 6 (4.0%) in hemophiliacs; 4 (2.6%) in transfusion/tissue recipients; and 10 (6.6%) are still being investigated and have not yet been placed in a specific exposure category.
- Table 2 shows reported HIV and AIDS cases by adjusted exposure category. In this table, those cases currently classified as "Other/Unknown Adult", many of which are still under investigation, have been assigned to a specific category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of these Other/Unknown Adult cases assigned to a given exposure category is based on past experience with cases initially classified as Other/Unknown Adult whose actual exposure risk was later determined following investigation.
- No perinatal HIV cases and no perinatal AIDS cases have been reported from the Northwest HIV Region. (Perinatal cases are the result of HIV transmission from an infected mother to her infant before or at the time of birth, or through breastfeeding.)

*Throughout this document, whenever HIV disease is being discussed, the term "white" indicates a non-Hispanic white person, and "black" indicates a non-Hispanic black individual. All persons whose ethnicity is reported as Hispanic, regardless of race (e.g., white or black), are characterized as "Hispanic".

HIV Disease Epi Profile Summary: Northwest HIV Region

HIV Disease Case

HIV Case

AIDS Case

Table 1. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Age at Diagnosis, Northwest HIV Region, 1982–2001

	HIV Cases				AIDS Cases				HIV Disease	
	Reported 2001*	%	Cumulative	%	Reported 2001	%	Cumulative	%	Cumulative	%
Cases			Cases		Cases		Cases		Cases	
Gender										
Male	2	(66.7%)	45	(81.8%)	6	(85.7%)	135	(89.4%)	180	(87.4%)
Female	1	(33.3%)	10	(18.2%)	1	(14.3%)	16	(10.6%)	26	(12.6%)
Race/Ethnicity										
White	3	(100.0%)	50	(90.9%)	7	(100.0%)	136	(90.1%)	186	(90.3%)
Black	0	(0.0%)	4	(7.3%)	0	(0.0%)	14	(9.3%)	18	(8.7%)
Hispanic	0	(0.0%)	0	(0.0%)	0	(0.0%)	1	(0.7%)	1	(0.5%)
Asian/Pacific Islander	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
American Indian	0	(0.0%)	1	(1.8%)	0	(0.0%)	0	(0.0%)	1	(0.5%)
Unknown	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Race/Ethnicity and Gender										
White Male	2	(66.7%)	43	(78.2%)	6	(85.7%)	123	(81.5%)	166	(80.6%)
Black Male	0	(0.0%)	1	(1.8%)	0	(0.0%)	11	(7.3%)	12	(5.8%)
Hispanic Male	0	(0.0%)	0	(0.0%)	0	(0.0%)	1	(0.7%)	1	(0.5%)
Asian/Pacific Islander Male	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
American Indian Male	0	(0.0%)	1	(1.8%)	0	(0.0%)	0	(0.0%)	1	(0.5%)
Unknown Male	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
White Female	1	(33.3%)	7	(12.7%)	1	(14.3%)	13	(8.6%)	20	(9.7%)
Black Female	0	(0.0%)	3	(5.5%)	0	(0.0%)	3	(2.0%)	6	(2.9%)
Hispanic Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Asian/Pacific Islander Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
American Indian Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Unknown Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Age at Diagnosis[‡]										
<13	—	—	0	(0.0%)	—	—	0	(0.0%)	—	—
13-19	—	—	5	(9.1%)	—	—	1	(0.7%)	—	—
20-29	—	—	21	(38.2%)	—	—	28	(18.5%)	—	—
30-39	—	—	16	(29.1%)	—	—	65	(43.0%)	—	—
40-49	—	—	8	(14.5%)	—	—	41	(27.2%)	—	—
50+	—	—	5	(9.1%)	—	—	16	(10.6%)	—	—
Northwest HIV Region Total	3	(100.0%)	55	(100.0%)	7	(100.0%)	151	(100.0%)	206	(100.0%)
* HIV Cases reported during 2001 which remained HIV cases at the end of that year.										
† For HIV Cases, Age at Diagnosis is the age at which the individual was first diagnosed with HIV infection.										
‡ For AIDS Cases, Age at Diagnosis is the age at which the individual was first diagnosed with AIDS.										

Table 2. HIV and AIDS Cases by Adjusted Exposure Category*, Northwest HIV Region Cumulative Through December 2001

Exposure Category	HIV Cases		AIDS Cases	
	Cumulative		Cumulative	
	Case	%	Case	%
Adult/Adolescent				
Men Who Have Sex With Men	32	(58.2%)	101	(66.9%)
Men Who Have Sex With Men & Inject Drug	6	(10.9%)	14	(9.3%)
Injecting Drug Use	4	(7.3%)	12	(7.9%)
Heterosexual Contact	12	(21.8%)	14	(9.3%)
Hemophilia/Coagulation Disorder	1	(1.8%)	6	(4.0%)
Blood Transfusion or Tissue Recipient	0	(0.0%)	4	(2.6%)
Risk Not Specified	—	—	—	—
Adult/Adolescent Subtotal	55	(100.0%)	151	(100.0%)
Pediatric Subtotal	0		0	
Total	55		151	

*Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

HIV Disease Epi Profile Summary: Northwest HIV Region

Where

- Of the 55 cumulative HIV cases reported from the Northwest HIV Region, 63.6% were from Buchanan County and 14.5% were from Clinton County. The remaining 21.8% of cases came from 8 other counties in the region; each of these counties had 1-2 reported cases. See Figure 9 in the “**Missouri**” section (page 25). Of the 4 cumulative HIV cases reported in blacks, 100.0% were from Buchanan County.
- Of the 151 cumulative AIDS cases reported from the Northwest HIV Region, 66.9% were from Buchanan County and 7.3% were from Clinton County. The remaining 25.8% of cases came from 11 other counties in the region; each of these counties had 1-9 reported cases. See Figure 10 in the “**Missouri**” section (page 25). Of the 14 cumulative AIDS cases reported in blacks, 85.7% were from Buchanan County.
- Tables 3 and 4 summarize cumulative reported HIV and AIDS cases by county of residence at time of diagnosis.
- Of the 35 HIV cases reported from Buchanan County, 11.4% were in blacks and 88.6% were in whites.
- Table 8 in the “**Missouri**” section (page 24) compares the numbers and rates of HIV and AIDS cases reported from persons in the Northwest HIV Region with corresponding numbers and rates of HIV and AIDS cases reported from other areas in the state.
- Table 10 in the “**Missouri**” section (page 25) shows numbers and rates of HIV cases reported in 2001 by race/ethnicity for the Northwest HIV Region, and compares these figures with those for HIV cases reported from Missouri's other HIV Regions.
- Figure 8 in the “**Missouri**” section (page 23) shows, for the counties within the region (as well as for the entire state), the numbers of living HIV Disease cases who have been reported to the Missouri Department of Health and Senior Services and who were residents of these counties when diagnosed.

**Table 3. Reported HIV Cases by Race/Ethnicity and Area
Northwest HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic	
	Cases	%	Cases	%	Cases	%
Buchanan County [†]	35	100.0%	31	88.6%	4	11.4%
Clinton County [†]	8	100.0%	--	--	--	--
Andrew County [†]	2	100.0%	--	--	--	--
Caldwell County [†]	2	100.0%	--	--	--	--
Gentry County [†]	2	100.0%	--	--	--	--
Nodaway County [†]	2	100.0%	--	--	--	--
Remainder of Region [†]	4	100.0%	--	--	--	--
Northwest HIV Region [†]	55	100.0%	50	90.9%	4	7.3%

[†] Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

**Table 4. Reported AIDS Cases by Race/Ethnicity and Area
Northwest HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic	
	Cases	%	Cases	%	Cases	%
Buchanan County [†]	101	100.0%	88	87.1%	12	11.9%
Clinton County [†]	11	100.0%	--	--	--	--
Grundy County [†]	9	100.0%	--	--	--	--
Andrew County [†]	7	100.0%	--	--	--	--
Nodaway County [†]	5	100.0%	--	--	--	--
Remainder of Region [†]	18	100.0%	--	--	--	--
Northwest HIV Region [†]	151	100.0%	136	90.1%	14	9.3%

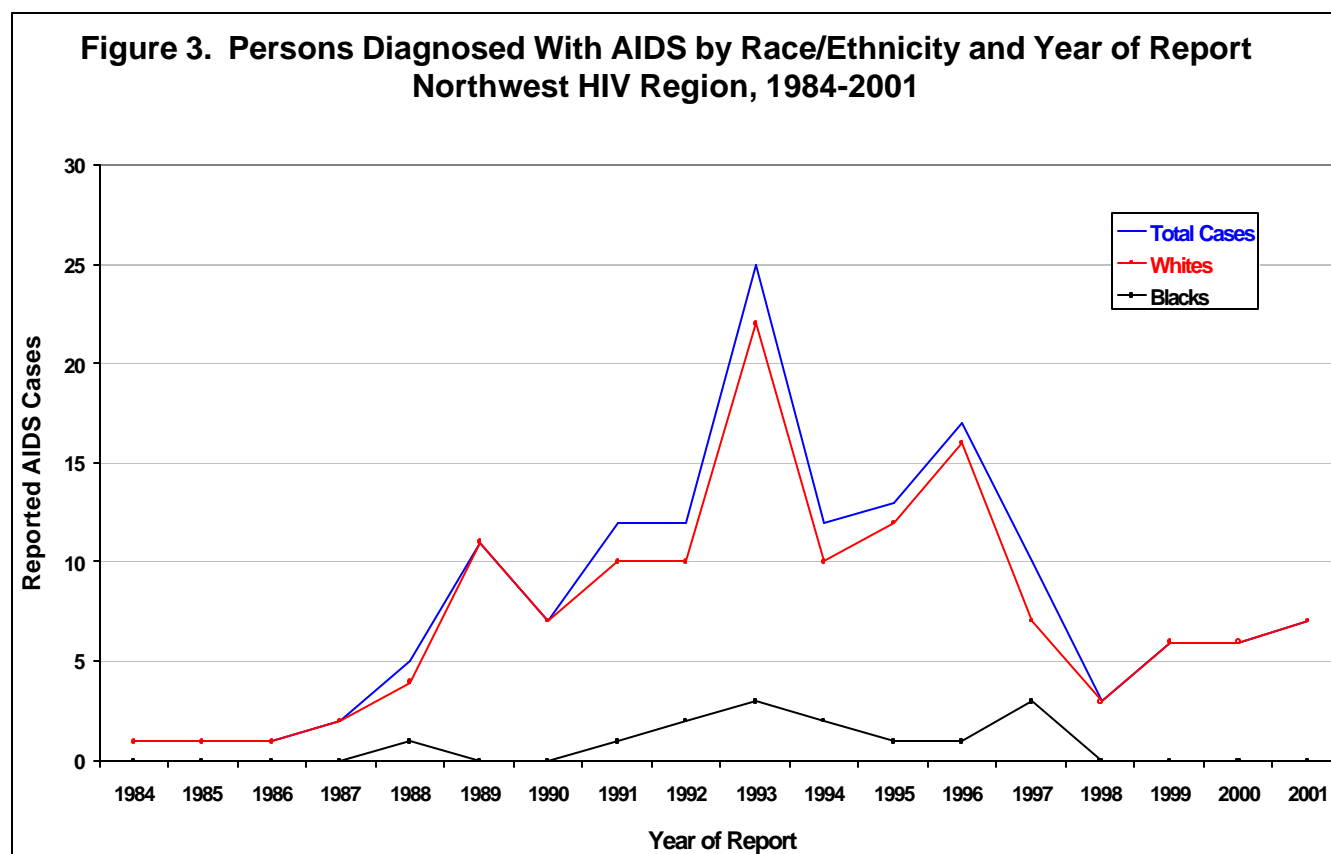
[†] Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

HIV Disease Epi Profile Summary: Northwest HIV Region

Trends

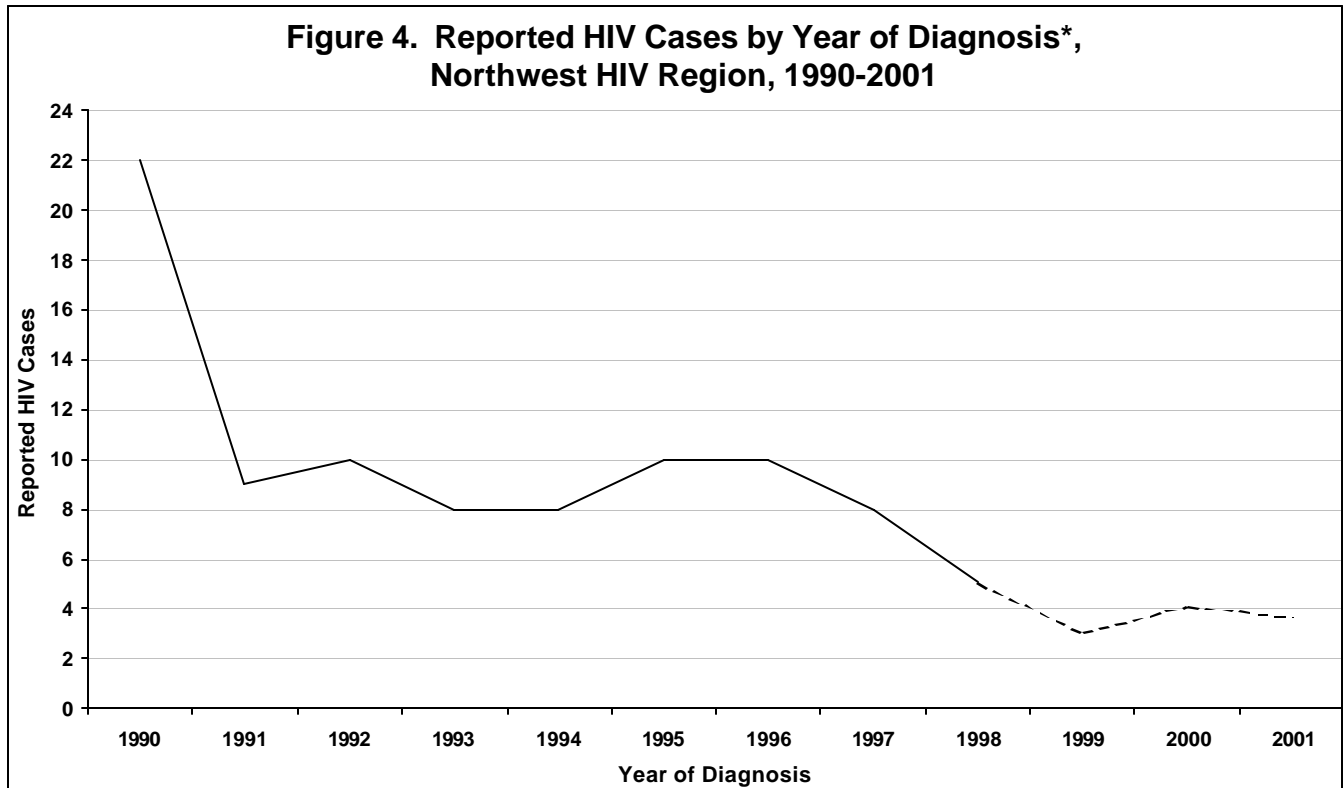
- Figure 1 on page 169 shows HIV Disease cases by year of initial report from 1984-2001. The 7 HIV Disease cases in Northwest HIV Region residents which were initially reported in 2001 represented no change from the 7 cases reported in 2000.
- Figure 2 on page 170 shows persons diagnosed with AIDS by year of report. The 7 AIDS cases reported in Northwest HIV Region residents in 2001 represented a 16.7% increase from the 6 cases reported in 2000.
- Figure 3 shows persons diagnosed with AIDS by race/ethnicity and year of report. All reported AIDS cases during the past three years have been in whites.
- A lower proportion of cumulative HIV cases, compared to cumulative AIDS cases, are MSM, and a somewhat higher proportion are heterosexual contacts (see Table 2). This provides some evidence that among more recently infected persons, a smaller proportion are being infected through male homosexual contact and a larger proportion are being infected through heterosexual contact. (However, it seems likely that the largest number of new infections continue to result from sexual contact between males.
- Figure 4 shows reported HIV cases[†] by year of diagnosis^{††} for the period from 1990-2001. The annual number of diagnosed cases decreased noticeably from 1990 to 1991, from 1991 through 1996 remained generally plateaued, decreased again from 1996 to 1999, and then remained plateaued at about 3-4 cases per year for the past three years.



[†] The HIV cases shown in Figure 4 represent individuals who were HIV cases (i.e., HIV infected but not AIDS) at the time of initial diagnosis of HIV infection. Some of these individuals have subsequently progressed to AIDS, while the rest currently remain HIV cases. However, in this figure, where the emphasis is on status at the time of initial diagnosis, all are considered HIV cases. (This is in contrast to the way data are presented in Table 1 and similar tables. In these tables, once an individual who is an HIV case meets the case definition for AIDS, he or she is no longer counted as an HIV case, but instead is counted as an AIDS case.)

^{††} Adjustments were made for delays in reporting of cases. That is, for more recent years, not all cases diagnosed during these years have been reported as yet. To adjust for this, estimates were made, based on past experience, of the additional number of cases expected to ultimately be reported, and these expected cases were added to those already reported to give the estimated total number of cases for a given year as shown in the figure.

HIV Disease Epi Profile Summary: Northwest HIV Region



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Northwest HIV Region

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HIV Disease Epi Profile Summary: Northwest HIV Region

Men Who Have Sex With Men (MSM)

Magnitude of the Problem

- From 1984 through 2001, a total of 127 HIV Disease cases in MSM have been reported in Northwest HIV Region residents (these cases make up 61.7% of all reported adult/adolescent HIV Disease cases in the region). Of these 127 HIV Disease cases, 96 (75.6%) are AIDS cases and 31 (24.4%) are HIV cases.
- The 96 AIDS cases in MSM make up 63.6% of all reported adult/adolescent AIDS cases in the region. In 2001, of the 7 adult/adolescent AIDS cases reported, the majority were in MSM.
- The 31 HIV cases in MSM make up 56.4% of total reported adult/adolescent HIV cases in the region.
- These numbers, however, do not completely indicate the full extent of MSM involvement since for 10 adult/adolescent AIDS cases, and 2 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 171). Here it is estimated that approximately 101 (66.9%) of the 151 total reported adult/adolescent AIDS cases, and approximately 32 (58.2%) of the 55 total reported adult/adolescent HIV cases, were in MSM.

Who

- Of total reported HIV cases among MSM, white men make up more than 95%.
- White men comprise more than 90% of total reported AIDS cases among MSM.
- Table 5 shows reported HIV cases in MSM by age group. The largest proportion of reported HIV cases (32.3%) were in men 20-29 years of age at the time of initial diagnosis.
- Information obtained through interviews with reported MSM HIV and AIDS cases indicates that at least 34% of these men (32% of white men and 57% of black men) have, in addition to having sex with other men, also had sex with females. (Note that the actual percentages could be higher because complete information may not have been obtained on all reported cases.)

Where

- Of the 31 total HIV cases reported in MSM, 20 (64.5%) were from Buchanan County. The remaining 11 (35.5%) cases were from 6 other counties in the region (each of these counties had 1-3 reported cases). See Table 6.

Trends

- It appears that during each of the past four years, from 1-4 HIV cases in MSM have been diagnosed in the Northwest HIV region.
- A lower proportion of cumulative HIV cases, compared to cumulative AIDS cases, are MSM. This provides some evidence that among more recently infected persons, a smaller proportion are being infected through male homosexual contact. However, it seems likely that the largest number of new infections continue to result from sexual contact between males.

HIV Disease Epi Profile Summary: Northwest HIV Region

Table 5. Reported HIV Cases in Men Who Have Sex With Men by Age Group, Northwest HIV Region, Cumulative Through December 2001

Age Group	HIV Cases	%
13-19	3	(9.7%)
20-29	10	(32.3%)
30-39	8	(25.8%)
40-49	5	(16.1%)
50+	5	(16.1%)
Northwest HIV Region Total	31	(100.0%)

Table 6. Reported HIV Cases in Men Who Have Sex With Men by County Northwest HIV Region, Cumulative Through December 2001

Geographic Area	HIV Cases	%
Buchanan County	20	(64.5%)
Remaining Counties*	11	(35.5%)
Northwest HIV Region Total	31	(100.0%)

*Cases were reported from 6 other counties in the region. Each of these counties had 1-3 reported cases.

HIV Disease Epi Profile Summary: Northwest HIV Region

Men Who Have Sex With Men and Inject Drugs (MSM/IDU)

Magnitude of the Problem

- From 1984 through 2001, a total of 20 HIV Disease cases in MSM/IDUs have been reported in Northwest HIV Region residents (these cases make up 9.7% of all reported adult/adolescent HIV Disease cases in the region). Of these 20 HIV Disease cases, 14 (70.0%) are AIDS cases and 6 (30.0%) are HIV cases.
- The 14 AIDS cases in MSM/IDU make up 9.3% of all reported adult/adolescent AIDS cases in the region.
- The 6 HIV cases in MSM/IDU make up 10.9% of total reported adult/adolescent HIV cases in the region.

Who

- Almost all reported MSM/IDU HIV Disease cases have been in white men.
- Table 7 shows reported HIV cases in MSM/IDUs by age group. Most reported MSM/IDU cases were diagnosed in their twenties or thirties.

Where

- The 6 total HIV cases reported in MSM/IDUs were from 3 counties in the region (each of these counties had 1-4 reported cases).

Trends

- It appears that during each of the past five years, from 0-1 HIV cases in MSM/IDUs have been diagnosed in the Northwest HIV Region.

**Table 7. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Age Group
Northwest HIV Region, Cumulative Through December 2001**

Age Group	HIV Cases	%
13-19	0	(0.0%)
20-29	2	(33.3%)
30-39	3	(50.0%)
40+	1	(16.7%)
Northwest HIV Region Total	6	(100.0%)

**Table 8. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by County
Northwest HIV Region, Cumulative Through December 2001**

The 6 total HIV cases reported in MSM/IDUs were from 3 counties
(each of these counties reported 1-4 cases).

Northwest HIV Region Total 6 (100.0%)

Injecting Drug Users (IDUs)

Magnitude of the Problem

- From 1984 through 2001, a total of 15 HIV Disease cases in IDUs have been reported in Northwest HIV Region residents (these cases make up 7.3% of all reported adult/adolescent HIV Disease cases in the region). Of these 15 HIV Disease cases, 11 (73.3%) are AIDS cases and 4 (26.7%) are HIV cases.
- The 11 AIDS cases in IDUs make up 7.3% of all reported adult/adolescent AIDS cases in the region.
- The 4 HIV cases in IDUs make up 7.3% of total reported adult/adolescent HIV cases in the region.

Who

- Three (75.0%) of the 4 reported HIV cases, and 8 (72.7%) of the 11 reported AIDS cases, were in males.
- Almost all reported IDU HIV Disease cases have been in whites.
- The largest number of reported IDU HIV cases were diagnosed in their twenties.

Where

- The 4 total HIV cases reported in IDUs were from 2 counties in the region (each of these counties reported 1-3 cases).
- Of the 11 total AIDS cases reported in IDUs, 8 (72.7%) were from Buchanan County.

Trends

- It appears that during each of the past six years, from 0-1 HIV cases in IDUs have been diagnosed in the Northwest HIV Region.

**Table 9. Reported HIV Cases in Injecting Drug Users by County
Northwest HIV Region, Cumulative Through December 2001**

The 4 total HIV cases reported in IDUs were from 2 counties
(each of these counties reported 1-3 cases).

Northwest HIV Region Total	4	(100.0%)
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Heterosexual Contacts

Magnitude of the Problem

- From 1984 through 2001, a total of 21 HIV Disease cases in heterosexual contacts have been reported in Northwest HIV Region residents (these cases make up 10.2% of all reported adult/adolescent HIV Disease cases in the region). Of these 21 HIV Disease cases, 10 (47.6%) are AIDS cases and 11 (52.4%) are HIV cases.
- The 10 AIDS cases in heterosexual contacts make up 6.6% of all reported adult/adolescent AIDS cases in the region.
- The 11 HIV cases in heterosexual contacts make up 20.0% of total reported adult/adolescent HIV cases in the region.
- These numbers, however, do not completely indicate the full extent of heterosexual contact involvement since for 10 adult/adolescent AIDS cases, and 2 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the “Other/Unknown” exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with “Other/Unknown” cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (page 171). Here it is estimated that approximately 14 (9.3%) of the 151 total reported adult/adolescent AIDS cases were in heterosexual contacts. Likewise, it is estimated that approximately 12 (21.8%) of the 55 total reported adult/adolescent HIV cases were in heterosexual contacts.

Who

- Of total reported HIV Disease cases in heterosexual contacts, 86.3% have been in females.
- Whites make up 71.4% of reported heterosexual contact HIV Disease cases.
- Table 10 shows reported HIV cases in heterosexual contacts by age group. The largest proportion of reported HIV cases (36.4%) were in persons 20-29 years of age at the time of initial diagnosis.

Where

- Of the 11 total HIV cases reported in heterosexual contacts, 7 (63.6%) were from Buchanan County. The remaining 4 (36.4%) cases were from 3 other counties in the region (each of these counties had 1-2 reported cases. See Table 11.

Trends

- It appears that during each year from 1990-2001, 0-2 HIV cases in heterosexual contacts have been diagnosed in the Northwest HIV Region.
- A somewhat higher proportion of cumulative HIV cases, compared to cumulative AIDS cases, are heterosexual contacts. This provides some evidence that among more recently infected persons, a larger proportion are being infected through heterosexual contact.

HIV Disease Epi Profile Summary: Northwest HIV Region

**Table 10. Reported HIV Cases in Heterosexual Contacts by Age Group
Northwest HIV Region, Cumulative Through December 2001**

Age Group	HIV Cases	%
13-19	2	(18.2%)
20-29	4	(36.4%)
30-39	3	(27.3%)
40+	2	(18.2%)
Northwest HIV Region Total	11	(100.0%)

**Table 11. Reported HIV Cases in Heterosexual Contacts by County
Northwest HIV Region, Cumulative Through December 2001**

Geographic Area	Cases	%
Buchanan County	7	(63.6%)
Remaining Counties	4	(36.4%)
Northwest HIV Region Total	11	(100.0%)

*Cases were reported from 3 other counties in the region. Each of these counties had 1-2 reported cases.

STD Epi Profile Summary: Northwest HIV Region

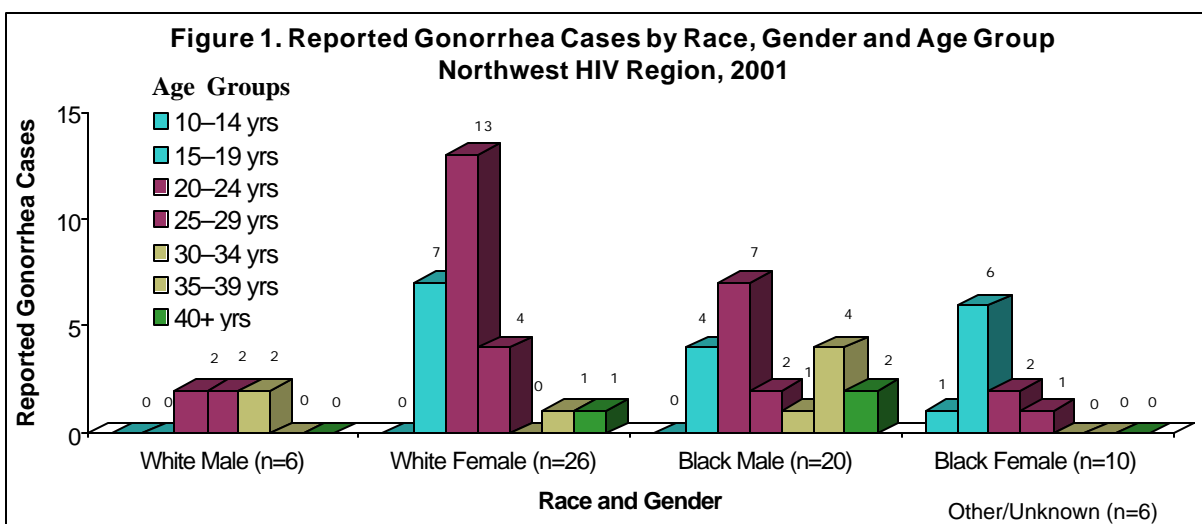
Gonorrhea

Magnitude of the Problem

- During 2001, 68 cases of gonorrhea were reported in the Northwest HIV Region; the corresponding rate* was 29.1 cases per 100,000 population.

Who

- Of the 68 gonorrhea cases reported in 2001, 30 (44.1%) were in males and 38 (55.9%) were in females. Among whites, a higher proportion of cases were reported in females (81.3%) than in males (18.7%). Among blacks, a higher proportion of cases were reported in males (66.7%) than in females (33.3%).
- Of the 68 gonorrhea cases reported in 2001, 32 (47.1%) were in whites and 30 (44.1%) were in blacks. One (1.5%) case was in another racial group, and for 5 (7.4%) cases, race was unknown.
- The rate* of reported cases in blacks (535.9) was about 37 times the rate* in whites (14.4).
- Table 1 on page 183 shows the numbers and rates of reported gonorrhea cases by race.
- Of the 68 gonorrhea cases reported in 2001, 18 (26.5%) were in teenagers. Teenagers made up 7 (70.0%) of the 10 black female cases, 7 (26.9%) of the 26 white female cases, and 4 (20.0%) of the 20 black male cases. No cases were reported in white male teenagers.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 68 gonorrhea cases reported, 45 (66.2%) were from Buchanan County, 5 (7.4%) were from Grundy County, and 4 (5.9%) were from Clinton County. The remaining counties in the region each had from 0-3 cases reported. Cases were reported from 9 (56.3%) of the region's 16 counties. Table 2 shows the number and percentage of cases reported from each county. Figure 2 is a map showing cases by county.
- The highest rate* of reported gonorrhea cases in 2001 was in Buchanan County (55.1). Table 2 shows rates of reported cases for the region's counties. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported gonorrhea cases by race from 1992-2001. The 68 gonorrhea cases reported in 2001 represented a 1.4% decrease from the 69 cases reported in 2000.

* All rates in this report are per 100,000 population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

STD Epi Profile Summary: Northwest HIV Region

Table 1. Reported Gonorrhea Cases and Rates by Race, Northwest HIV Region, 2001

	Cases	%	Rate*
Whites	32	47.1%	14.4
Blacks.....	30	44.1%	535.9
Other/Unknown	6	8.8%	—
Total Cases	68	100.0%	29.1

Table 2. Reported Gonorrhea Cases and Rates by County Northwest HIV Region, 2001

	Cases	%	Rate*
Buchanan	45	66.2%	55.1
Grundy	5	7.4%	49.3
Clinton	4	5.9%	20.5
Harrison	3	4.4%	35.7
Livingston	3	4.4%	21.4
Nodaway	3	2.9%	9.7
Daviess	2	2.9%	24.8
Mercer	2	2.9%	50.6
Caldwell	1	1.5%	11.2
Total Cases	68	100.0%	29.1

*Per 100,000 population

Figure 2. Reported Gonorrhea Cases by County Northwest HIV Region, 2001

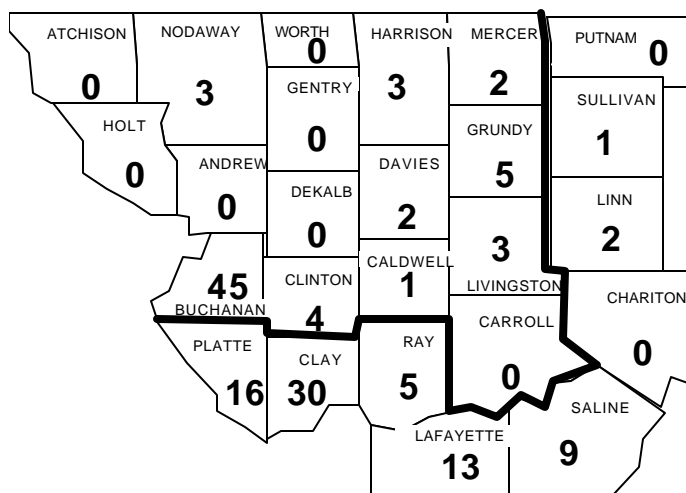


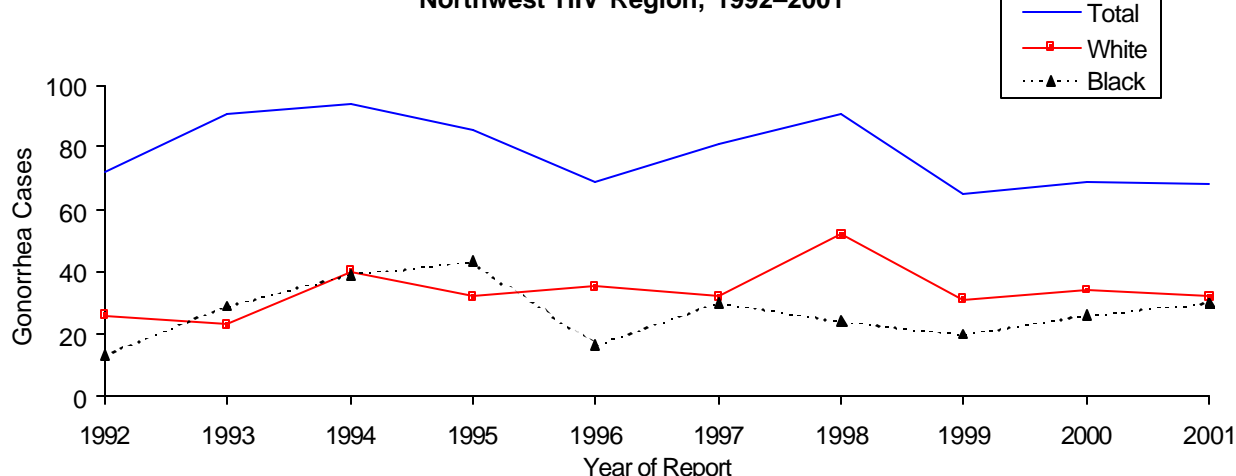
Table 3. Reported Gonorrhea Cases and Rates by Race and County, Northwest HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Buchanan County	45	100.0%	55.1	18	40.0%	23.1	26	57.8%	832.8
Grundy County	5	100.0%	49.3	5	100.0%	49.8	0	0.0%	0.0
Clinton County	4	100.0%	20.5	2	50.0%	10.6	2	50.0%	397.6
Harrison County	3	100.0%	35.7	2	66.7%	24.0	0	0.0%	0.0
Livingston County	3	100.0%	21.4	1	33.3%	7.4	1	33.3%	235.8
Nodaway County	3	100.0%	14.6	1	33.3%	5.0	1	33.3%	518.1
Daviess County	2	100.0%	24.8	1	50.0%	12.5	0	0.0%	0.0
Mercer County	2	100.0%	50.6	2	100.0%	50.7	0	0.0%	0.0
Caldwell County	1	100.0%	11.2	0	0.0%	0.0	0	0.0%	0.0
Northwest HIV Region	68	100.0%	29.1	32	47.1%	14.1	30	44.1%	524.6

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

Figure 3. Reported Gonorrhea Cases by Race and Year of Report Northwest HIV Region, 1992–2001



STD Epi Profile Summary: Northwest HIV Region

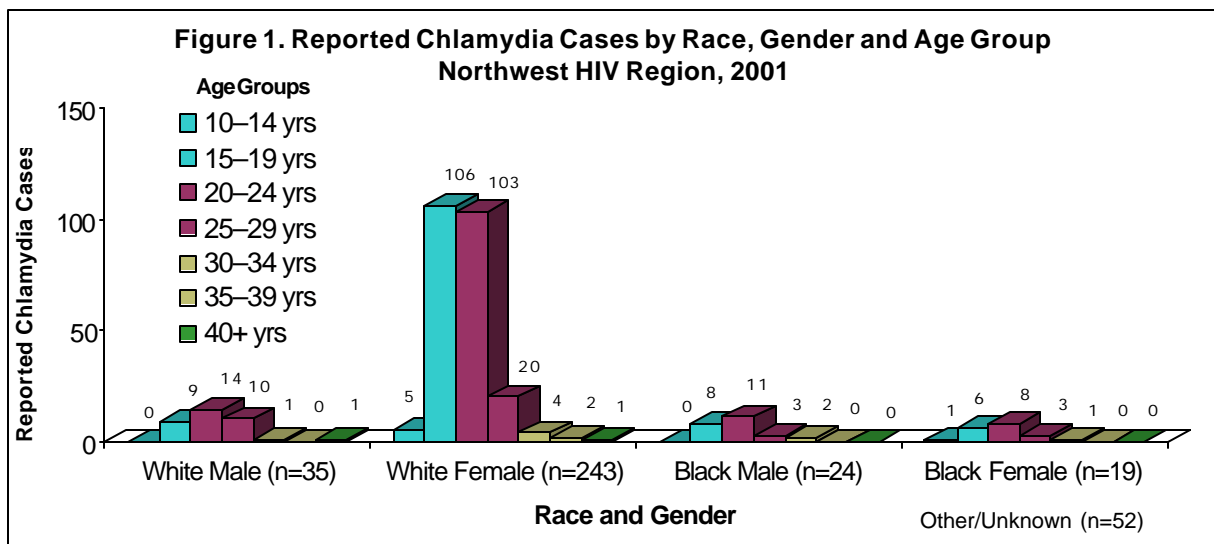
Chlamydia

Magnitude of the Problem

- During 2001, 373 cases of chlamydia were reported in the Northwest HIV Region; the corresponding rate* was 159.5 cases per 100,000 population.

Who

- Of the 373 chlamydia cases reported in 2001, 70 (18.8%) were in males and 303 (81.2%) were in females. Among whites, a higher proportion of cases were reported in females (87.4%) than in males (12.6%). Among blacks, a higher proportion of cases were reported in males (55.8%) than in females (44.2%).
- Of the 373 chlamydia cases reported in 2001, 278 (74.5%) were in whites and 43 (11.5%) were in blacks. Six (1.6%) cases were in other racial groups, and for 46 (12.3%) cases, race was unknown.
- The rate* of reported cases in blacks (768.1) was about 6 times the rate* in whites (124.7).
- Table 1 on page 185 shows the numbers and rates of reported chlamydia cases by race.
- Of the 373 chlamydia cases reported in 2001, 152 (40.8%) were in teenagers. Teenagers made up 7 (36.8%) of the 19 black female cases, 111 (45.7%) of the 243 white female cases, 8 (33.3%) of the 24 black male cases, and 9 (25.7%) of the 35 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 373 chlamydia cases reported, 233 (62.5%) were from Buchanan County, 27 (7.2%) from Nodaway County, and 21 (5.6%) from Grundy County. The remaining counties in the region each had from 0-18 cases reported. Cases were reported from 14 of the region's counties. Table 2 shows the number and percentage of cases reported from those counties having the largest numbers of cases. Figure 2 is a map showing cases by county.
- The highest rate* of reported chlamydia cases in 2001 was in Buchanan County (285.4). Table 2 shows rates of reported cases for counties with the most cases. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported chlamydia cases by race from 1992-2001. The 373 cases reported in 2001 represented a 11.8% decrease from the 423 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: Northwest HIV Region

Table 1. Reported Chlamydia Cases and Rates by Race, Northwest HIV Region, 2001

	Cases	%	Rate*
Whites	278	74.5%	124.7
Blacks	43	11.5%	768.1
Other/Unknown	52	13.9%	—
Total Cases	373	100.0%	159.5

Table 2. Reported Chlamydia Cases and Rates for Selected Counties Northwest HIV Region, 2001

	Cases	%	Rate*
Buchanan	233	62.5%	285.4
Nodaway	27	7.2%	131.5
Grundy	21	5.6%	207.2
Clinton	18	4.8%	92.2
Livingston	16	4.3%	114.1
Daviess	15	4.0%	186.3
Total Cases	373	100.0%	159.5

*Per 100,000 population

Figure 2. Reported Chlamydia Cases by County Northwest HIV Region, 2001

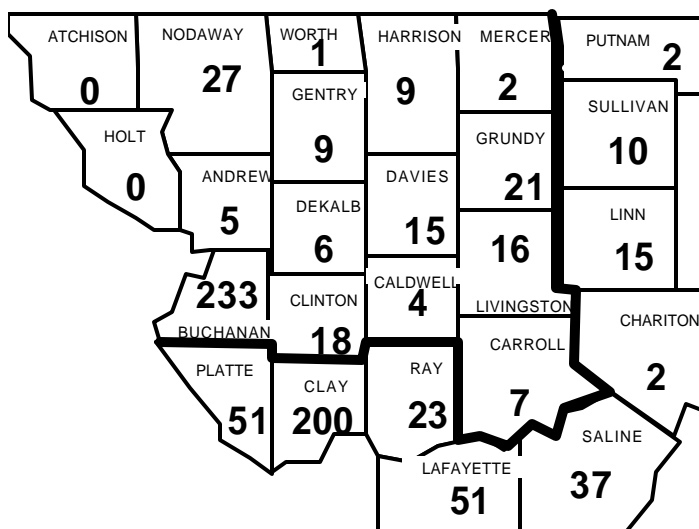


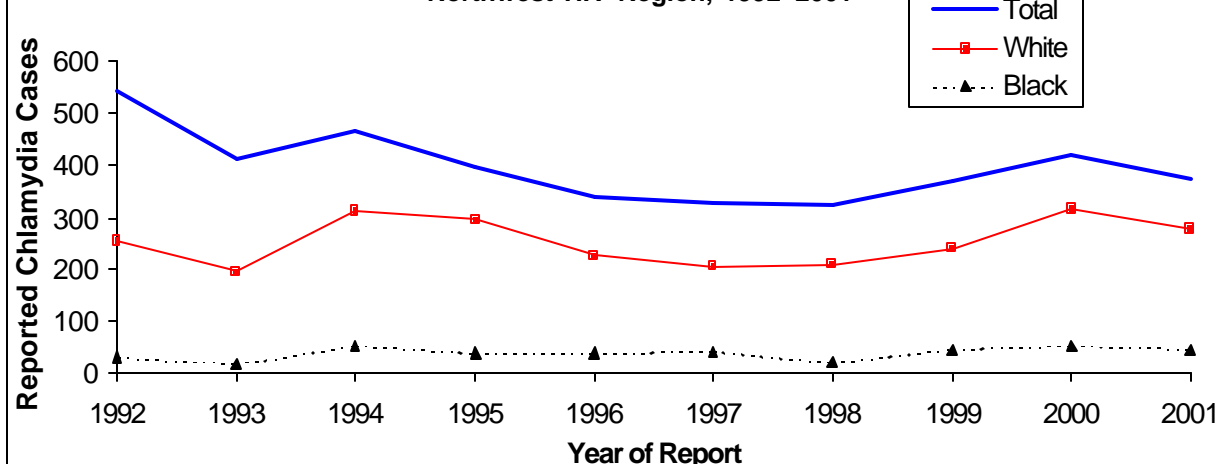
Table 3. Reported Chlamydia Cases and Rates by Race and County, Northwest HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Buchanan County	233	100.0%	285.4	173	74.2%	228.8	36	15.5%	1173.4
Nodaway County	27	100.0%	131.5	20	74.1%	100.3	5	18.5%	2617.8
Grundy County	21	100.0%	207.2	14	66.7%	140.7	0	0.0%	0.0
Clinton County	18	100.0%	92.2	15	83.3%	80.2	1	5.6%	207.5
Livingston County	16	100.0%	114.1	12	75.0%	89.2	0	0.0%	0.0
Daviess County	15	100.0%	186.3	12	80.0%	151.1	0	0.0%	0.0
Gentry County	9	100.0%	131.0	5	55.6%	73.6	0	0.0%	0.0
Harrison County	9	100.0%	107.0	7	77.8%	84.3	0	0.0%	0.0
Carroll County	7	100.0%	69.3	5	71.4%	51.1	1	14.3%	393.7
DeKalb County	6	100.0%	53.2	5	83.3%	51.0	0	0.0%	0.0
Andrew County	5	100.0%	32.1	5	100.0%	32.6	0	0.0%	0.0
Caldwell County	4	100.0%	44.8	3	75.0%	34.1	0	0.0%	0.0
Mercer County	2	100.0%	50.6	1	50.0%	25.4	0	0.0%	0.0
Worth County	1	100.0%	43.6	1	100.0%	44.0	0	0.0%	0.0
Northwest HIV Region	373	100.0%	159.5	278	74.5%	124.7	43	11.5%	768.1

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

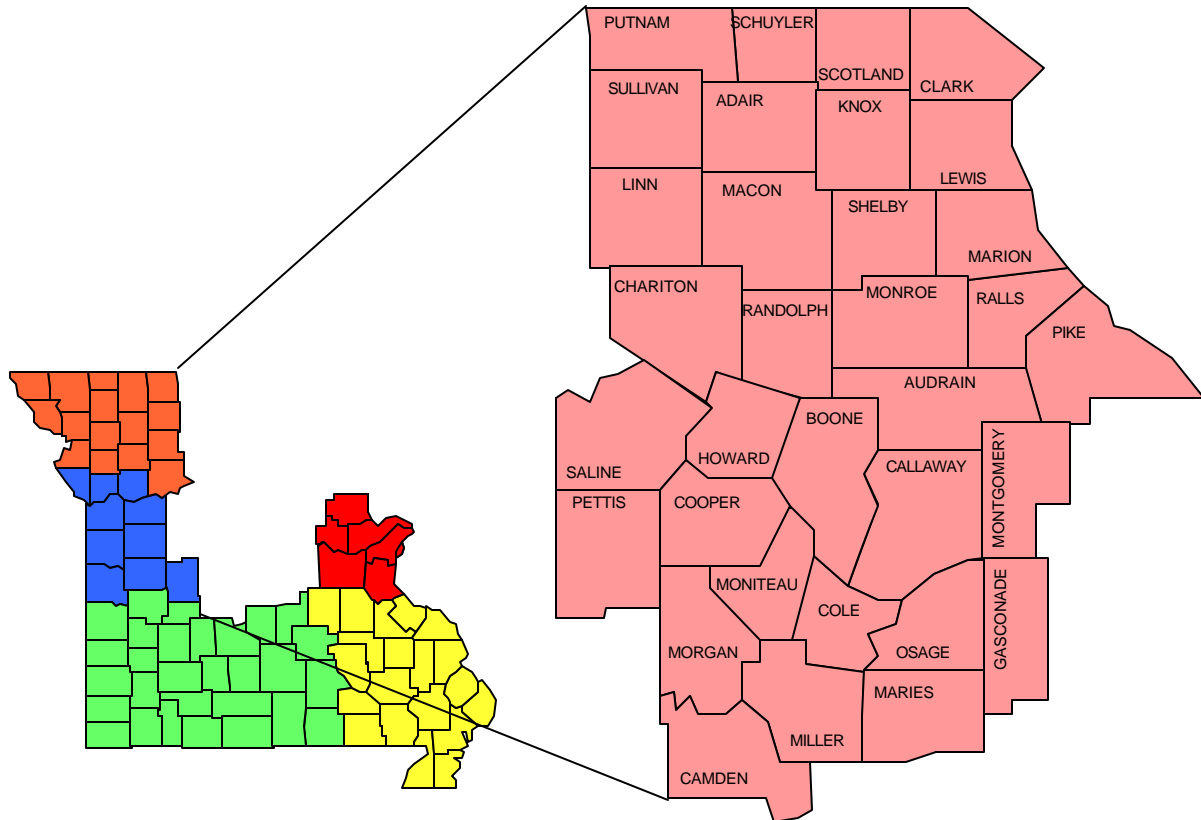
Figure 3. Reported Chlamydia Cases by Race Area and Year of Report Northwest HIV Region, 1992–2001



STD Epi Profile Summary: Northwest HIV Region

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North Central HIV Region



1999 Population Estimates for the North Central HIV Region

County	White		African American		American Indian		Asian/Pacific Is		Hispanic		Total	
Adair County	23,367	96.6%	255	1.1%	39	0.2%	281	1.2%	258	1.1%	24,200	100.0%
Audrain County	21,401	91.3%	1,775	7.6%	34	0.1%	132	0.6%	107	0.5%	23,449	100.0%
Boone County	111,303	85.5%	11,547	8.9%	381	0.3%	4,938	3.8%	2,010	1.5%	130,179	100.0%
Callaway County	34,995	92.3%	2,318	6.1%	103	0.3%	205	0.5%	283	0.7%	37,904	100.0%
Camden County	33,959	98.2%	99	0.3%	122	0.4%	83	0.2%	333	1.0%	34,596	100.0%
Chariton County	8,125	95.0%	390	4.6%	14	0.2%	8	0.1%	20	0.2%	8,557	100.0%
Clark County	7,312	99.3%	8	0.1%	8	0.1%	6	0.1%	33	0.4%	7,367	100.0%
Cole County	62,312	89.6%	5,846	8.4%	234	0.3%	414	0.6%	706	1.0%	69,512	100.0%
Cooper County	14,300	88.5%	1,593	9.9%	54	0.3%	69	0.4%	137	0.8%	16,153	100.0%
Gasconade County	14,854	99.2%	10	0.1%	19	0.1%	30	0.2%	62	0.4%	14,975	100.0%
Howard County	8,668	89.7%	889	9.2%	28	0.3%	23	0.2%	53	0.5%	9,661	100.0%
Knox County	4,277	99.2%	14	0.3%	10	0.2%	3	0.1%	8	0.2%	4,312	100.0%
Lewis County	9,748	95.3%	411	4.0%	18	0.2%	19	0.2%	34	0.3%	10,230	100.0%
Linn County	13,569	97.9%	118	0.9%	21	0.2%	21	0.2%	138	1.0%	13,867	100.0%
Macon County	14,846	96.1%	450	2.9%	46	0.3%	27	0.2%	81	0.5%	15,450	100.0%
Maries County	8,296	98.5%	28	0.3%	19	0.2%	16	0.2%	64	0.8%	8,423	100.0%
Marion County	25,807	93.1%	1,515	5.5%	65	0.2%	156	0.6%	176	0.6%	27,719	100.0%
Miller County	22,294	98.5%	33	0.1%	89	0.4%	44	0.2%	164	0.7%	22,624	100.0%
Moniteau County	12,951	97.3%	182	1.4%	48	0.4%	54	0.4%	78	0.6%	13,313	100.0%
Monroe County	8,623	94.4%	413	4.5%	18	0.2%	17	0.2%	66	0.7%	9,137	100.0%
Montgomery County	11,625	96.0%	367	3.0%	12	0.1%	33	0.3%	73	0.6%	12,110	100.0%
Morgan County	18,511	97.9%	145	0.8%	79	0.4%	48	0.3%	125	0.7%	18,908	100.0%
Osage County	12,369	98.8%	45	0.4%	17	0.1%	3	0.0%	90	0.7%	12,524	100.0%
Pettis County	34,920	94.1%	1,529	4.1%	87	0.2%	171	0.5%	403	1.1%	37,110	100.0%
Pike County	15,106	92.0%	1,051	6.4%	48	0.3%	31	0.2%	175	1.1%	16,411	100.0%
Putnam County	4,816	98.9%	14	0.3%	8	0.2%	6	0.1%	28	0.6%	4,872	100.0%
Ralls County	8,916	97.2%	192	2.1%	19	0.2%	14	0.2%	28	0.3%	9,169	100.0%
Randolph County	21,280	89.2%	2,150	9.0%	71	0.3%	102	0.4%	260	1.1%	23,863	100.0%
Saline County	20,793	91.3%	1,600	7.0%	41	0.2%	64	0.3%	284	1.2%	22,782	100.0%
Schuyler County	4,375	99.1%	0	0.0%	8	0.2%	4	0.1%	28	0.6%	4,415	100.0%
Scotland County	4,891	99.4%	3	0.1%	10	0.2%	0	0.0%	17	0.3%	4,921	100.0%
Shelby County	6,526	98.0%	83	1.2%	14	0.2%	5	0.1%	32	0.5%	6,660	100.0%
Sullivan County	6,777	98.7%	18	0.3%	14	0.2%	3	0.0%	52	0.8%	6,864	100.0%
Region Totals	631,912	92.6%	35,091	5.1%	1,798	0.3%	7,030	1.0%	6,406	0.9%	682,237	100.0%

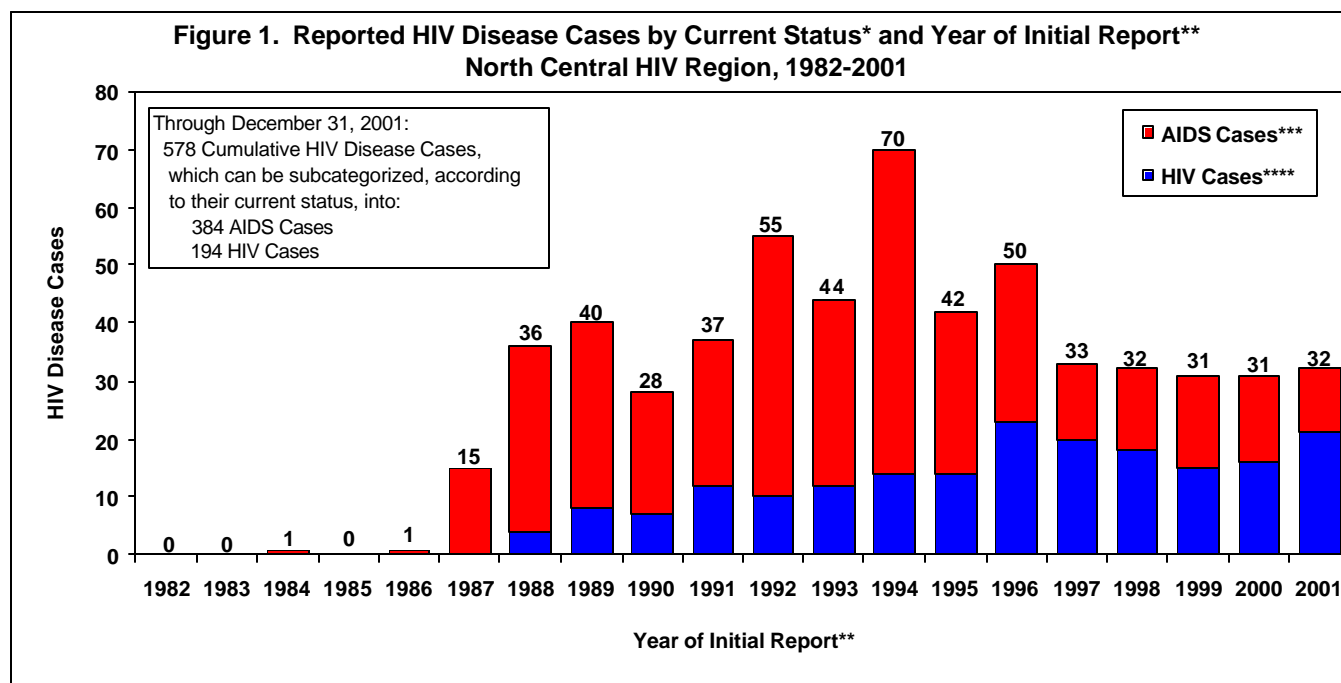
Source: U.S. Census Bureau

HIV Disease Epi Profile Summary: North Central HIV Region

Magnitude and Impact of the Problem

- From 1984 through 2001, a total of 578 HIV Disease cases have been reported in residents of the North Central HIV Region*. In 2001, 32 new HIV Disease cases were reported for the first time to public health officials. Figure 1 shows reported HIV Disease cases by current status (HIV case vs. AIDS case) and year of initial report (i.e., the year in which the first report of the person, whether as an HIV case or an AIDS case, was received). (See also the section entitled “**Trends**” on page 191.)
- Of these 578 HIV Disease cases, 384 (66.4%) have met the case definition for AIDS and are thus categorized as AIDS cases; 187 (48.7%) of the 384 reported AIDS cases are known to have died, and 197 (51.3%) are living. In 2001, 17 AIDS cases were reported. Figure 2 (on page 188) shows persons (living and deceased) diagnosed with AIDS by year of report (see also the section entitled “**Trends**” on page 191).
- Of the 578 reported HIV Disease cases, 194 (33.6%) have not met the case definition for AIDS, and are thus categorized as HIV cases; 21 HIV cases* were reported in 2001.

*When reference is made to HIV cases reported in 2001, this means HIV cases reported during that year which remained HIV cases at the end of the year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included (instead, they are included among the AIDS cases reported in 2001).



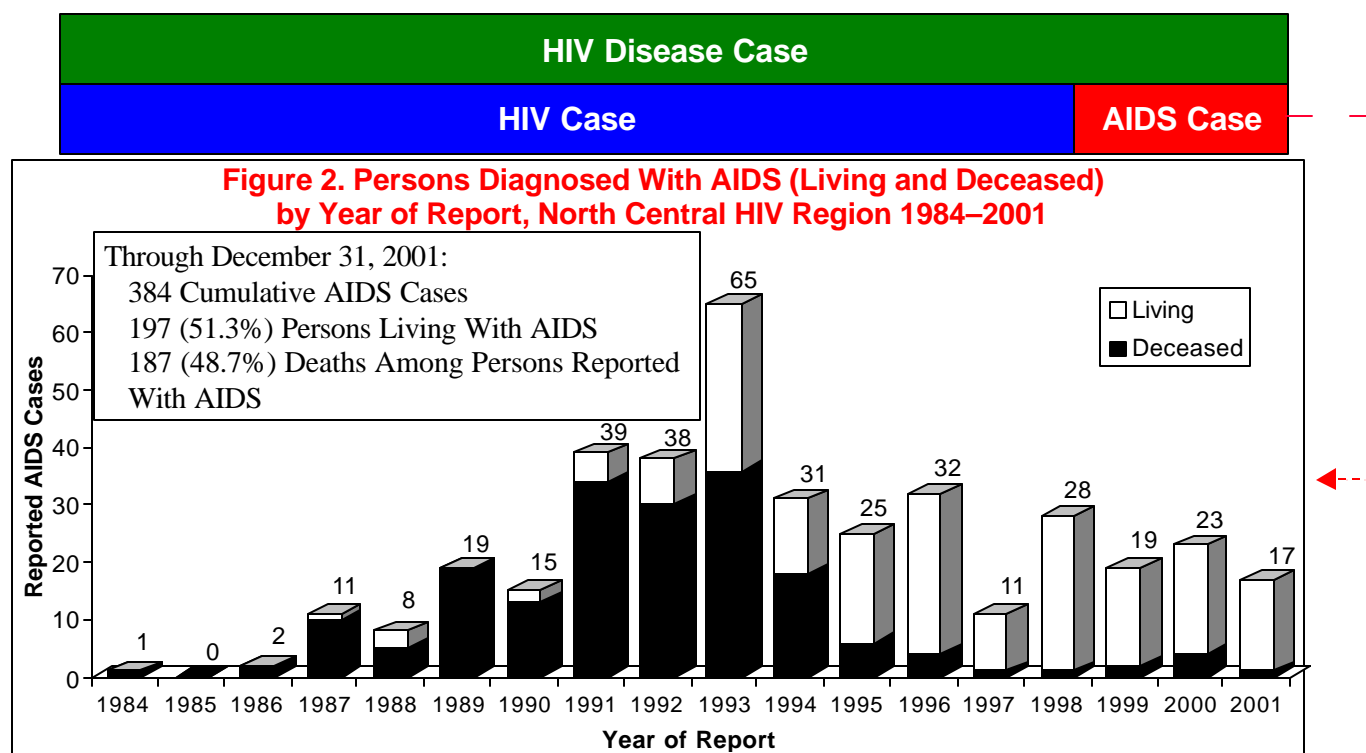
*HIV Cases vs. AIDS Cases

**Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)

***These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition; or 2) initially reported as an AIDS case.

****These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

HIV Disease Epi Profile Summary: North Central HIV Region



Who

- Table 1 describes HIV cases, AIDS cases, and HIV Disease cases by gender, race/ethnicity, and age at diagnosis.
- Males comprise 75.3% of the 194 cumulative reported HIV cases and 83.6% of the 384 cumulative reported AIDS cases.
- Blacks* are disproportionately represented among reported HIV Disease cases. Although blacks make up only about 5% of the North Central HIV Region's population, they have accounted for 24.7% of reported HIV cases and 17.2% of reported AIDS cases. The rate for HIV cases reported in 2001 in blacks (22.8) was 12.0 times the rate in whites* (1.9).
- The over-representation of blacks is especially seen in reported HIV and AIDS cases in females. Of the 48 reported female HIV cases, 17 (35.4%) were in black females. Of the 63 reported female AIDS cases, 17 (27.0%) were in black females.
- For Hispanics, the numbers of reported HIV and AIDS cases have been very small (4 cumulative HIV cases with 1 case reported in 2001; 4 cumulative AIDS cases with 1 case reported in 2001).
- The numbers of total reported HIV and AIDS cases in Asians and in American Indians have also been very small (1 HIV case and 3 AIDS cases in Asians; 0 HIV cases and 1 AIDS case in American Indians).
- Of the 194 reported HIV cases, 43.3% were diagnosed in 20-29 year olds, 36.1% in 30-39 year olds, 11.9% in 40-49 year olds, 4.1% in 13-19 year olds, and 3.1% in persons 50 years of age and older.
- Of the 191 reported adult/adolescent HIV cases: 101 (52.9%) were in men who have sex with men (MSM); 9 (4.7%) in men who have sex with men and inject drugs (MSM/IDU); 19 (9.9%) in injecting drug users (IDUs); 41 (21.5%) in heterosexual contacts; and 18 (9.4%) are still being investigated and have not yet been placed in a specific exposure category.
- Of the 377 reported adult/adolescent AIDS cases: 212 (56.2%) were in MSM; 27 (7.2%) in MSM/IDUs; 24 (6.4%) in IDUs; 58 (15.4%) in heterosexual contacts; and 13 (3.4%) are still being investigated and have not yet been placed in a specific exposure category.
- Table 2 shows HIV and AIDS cases by adjusted exposure category. In this table, those cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, heterosexual contact) in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of these cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation.
- A total of 3 perinatal HIV cases and 7 perinatal AIDS cases have been reported. No perinatal HIV or AIDS cases were reported. (Perinatal cases are the result of HIV transmission from an infected mother to her infant before or at the time of birth, or through breastfeeding.)

*Throughout this document, whenever HIV disease is being discussed, the term "white" indicates a non-Hispanic white person, and "black" indicates a non-Hispanic black individual. All persons whose ethnicity is reported as Hispanic, regardless of race (e.g., white or black), are characterized as "Hispanic".

HIV Disease Epi Profile Summary: North Central HIV Region

HIV Disease Case

HIV Case

AIDS Case

Table 1. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Age at Diagnosis, North Central HIV Region, 1982–2001

	HIV Cases				AIDS Cases				HIV Disease	
	Reported 2001*	%	Cumulative Cases	%	Reported 2001	%	Cumulative Cases	%	Cumulative Cases	%
Gender										
Male	13	(61.9%)	146	(75.3%)	12	(70.6%)	321	(83.6%)	467	(80.8%)
Female	8	(38.1%)	48	(24.7%)	5	(29.4%)	63	(16.4%)	111	(19.2%)
Race/Ethnicity										
White	12	(57.1%)	139	(71.6%)	9	(52.9%)	310	(80.7%)	449	(77.7%)
Black	8	(38.1%)	48	(24.7%)	7	(41.2%)	66	(17.2%)	114	(19.7%)
Hispanic	1	(4.8%)	4	(2.1%)	1	(5.9%)	4	(1.0%)	8	(1.4%)
Asian/Pacific Islander	0	(0.0%)	1	(0.5%)	—	—	3	(0.8%)	4	(0.7%)
American Indian	0	(0.0%)	0	(0.0%)	—	—	1	(0.3%)	1	(0.2%)
Unknown	0	(0.0%)	2	(1.0%)	—	—	0	(0.0%)	2	(0.3%)
Race/Ethnicity and Gender										
White Male	10	(47.6%)	111	(57.2%)	7	(41.2%)	265	(69.0%)	365	(65.1%)
Black Male	3	(14.3%)	31	(16.0%)	4	(23.5%)	49	(12.8%)	76	(13.8%)
Hispanic Male	—	—	2	(1.0%)	1	(5.9%)	3	(0.8%)	4	(0.9%)
Asian/Pacific Islander Male	—	—	0	(0.0%)	—	—	3	(0.8%)	3	(0.5%)
American Indian Male	—	—	0	(0.0%)	—	—	1	(0.3%)	1	(0.2%)
Unknown Male	—	—	2	(1.0%)	—	—	0	(0.0%)	3	(0.3%)
White Female	2	(9.5%)	28	(14.4%)	2	(11.8%)	45	(11.7%)	69	(12.6%)
Black Female	5	(23.8%)	17	(8.8%)	3	(17.6%)	17	(4.4%)	26	(5.9%)
Hispanic Female	1	(4.8%)	2	(1.0%)	—	—	1	(0.3%)	2	(0.5%)
Asian/Pacific Islander Female	—	—	1	(0.5%)	—	—	0	(0.0%)	1	(0.2%)
American Indian Female	—	—	0	(0.0%)	—	—	0	(0.0%)	0	(0.0%)
Unknown Female	—	—	0	(0.0%)	—	—	0	(0.0%)	0	(0.0%)
Age at Diagnosis[‡]										
<13	0	(0.0%)	3	(1.5%)	0	(0.0%)	5	(1.3%)	—	—
13-19	2	(9.5%)	8	(4.1%)	0	(0.0%)	8	(2.1%)	—	—
20-29	9	(42.9%)	84	(43.3%)	0	(0.0%)	85	(22.1%)	—	—
30-39	4	(19.0%)	70	(36.1%)	6	(35.3%)	154	(40.1%)	—	—
40-49	3	(14.3%)	23	(11.9%)	7	(41.2%)	86	(22.4%)	—	—
50+	3	(14.3%)	6	(3.1%)	4	(23.5%)	46	(12.0%)	—	—
North Central HIV Region Total	21 (100.0%)		194 (100.0%)		17 (100.0%)		384 (100.0%)		578 (100.0%)	

* HIV Cases reported during 2001 which remained HIV cases at the end of that year.

† For HIV Cases, Age at Diagnosis is the age at which the individual was first diagnosed with HIV infection.

‡ For AIDS Cases, Age at Diagnosis is the age at which the individual was first diagnosed with AIDS.

Table 2. HIV and AIDS Cases by Adjusted Exposure Category*, North Central HIV Region Cumulative Through December 2001

Exposure Category	HIV Cases Cumulative		AIDS Cases Cumulative	
	Case	%	Case	%
Adult/Adolescent				
Men Who Have Sex With Men	105	(55.0%)	219	(58.1%)
Men Who Have Sex With Men & Inject Drug	9	(4.7%)	27	(7.2%)
Injecting Drug Us	22	(11.5%)	25	(6.6%)
Heterosexual Contact	52	(27.2%)	63	(16.7%)
Hemophilia/Coagulation Disorder	2	(1.0%)	27	(7.2%)
Blood Transfusion or Tissue Recipient	1	(0.5%)	16	(4.2%)
Risk Not Specified	--	---	--	---
Adult/Adolescent Subtotal	191	(100.0%)	377	(100.0%)
Pediatric Subtotal	3		7	
Total	194		384	

* Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

HIV Disease Epi Profile Summary: North Central HIV Region

Where

- Of the 194 cumulative HIV cases reported from the North Central HIV Region, 47.4% were from Boone County; 11.3% from Cole County; and 4.1% from Callaway County. The remaining 37.1% of cases came from 22 other counties in the region; each of these counties had 1-7 reported cases. See Figure 9 in the **"Missouri"** section (page 25). Of the 48 cumulative HIV cases reported in blacks, the majority were from Boone County (52.1%) and Cole County (18.8%).
- Of the 384 cumulative AIDS cases reported from the North Central HIV Region, 43.5% were from Boone County; 9.9% from Cole County; 4.7% from Callaway County; and 4.2% from Pettis County. The remaining 37.8% of cases came from 25 other counties in the region; each of these counties had 1-13 cases. See Figure 10 in the **"Missouri"** section (page 25). Of the 66 cumulative AIDS cases reported in blacks, the majority were from Boone County (53.9%) and Cole County (19.7%).
- Tables 3 and 4 summarize cumulative reported HIV and AIDS cases by area.
- Table 8 in the **"Missouri"** section (page 24) compares the numbers and rates of HIV and AIDS cases reported from persons in the North Central HIV Region with corresponding numbers and rates of HIV and AIDS cases reported from other areas in the state.
- Table 9 in the **"Missouri"** section (page 25) shows numbers and rates of HIV cases reported in 2001 by race/ethnicity for Outstate Missouri, and compares these figures with those for HIV cases reported from St. Louis City, St. Louis County, and Kansas City.
- Table 10 in the **"Missouri"** section (page 25) shows numbers and rates of HIV cases reported in 2001 by race/ethnicity for the North Central HIV Region, and compares these figures with those for HIV cases reported from Missouri's other HIV Regions.
- Figure 8 in the **"Missouri"** section (page 23) shows, for the counties within the region (as well as for the entire state), the numbers of living HIV Disease cases who have been reported to the Missouri Department of Health and Senior Services and who were residents of these counties when diagnosed.

**Table 3. Reported HIV Cases by Race/Ethnicity and Area
North Central HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic	
	Cases	%	Cases	%	Cases	%
Boone County [†]	92	100.0%	64	69.6%	25	27.2%
Cole County [†]	22	100.0%	12	54.5%	9	40.9%
Callaway County [†]	8	100.0%	6	75.0%	2	25.0%
Marion County [†]	7	100.0%	3	42.9%	4	57.1%
Pettis County [†]	6	100.0%	5	83.3%	1	16.7%
Saline County [†]	6	100.0%	3	50.0%	2	33.3%
Remainder of Region [†]	53	100.0%	46	86.8%	5	9.4%
North Central HIV Region [†]	194	100.0%	139	71.6%	48	24.7%

[†] Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

**Table 4. Reported AIDS Cases by Race/Ethnicity and Area
North Central HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic	
	Cases	%	Cases	%	Cases	%
Boone County [†]	167	100.0%	130	77.8%	35	21.0%
Cole County [†]	38	100.0%	22	57.9%	13	34.2%
Callaway County [†]	18	100.0%	16	88.9%	2	11.1%
Pettis County [†]	16	100.0%	14	87.5%	1	6.3%
Randolph County [†]	13	100.0%	12	92.3%	1	7.7%
Remainder of Region [†]	132	100.0%	116	87.9%	14	10.6%
North Central HIV Region [†]	384	100.0%	310	80.7%	66	17.2%

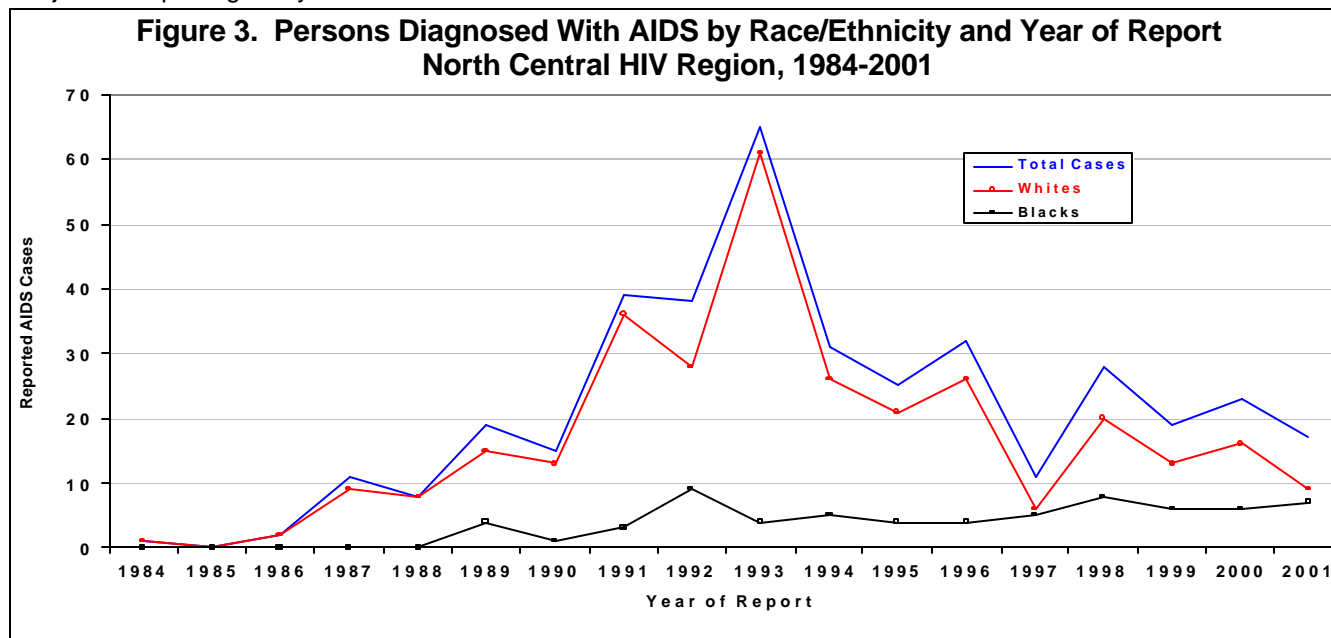
[†] Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

HIV Disease Epi Profile Summary: North Central HIV Region

Trends

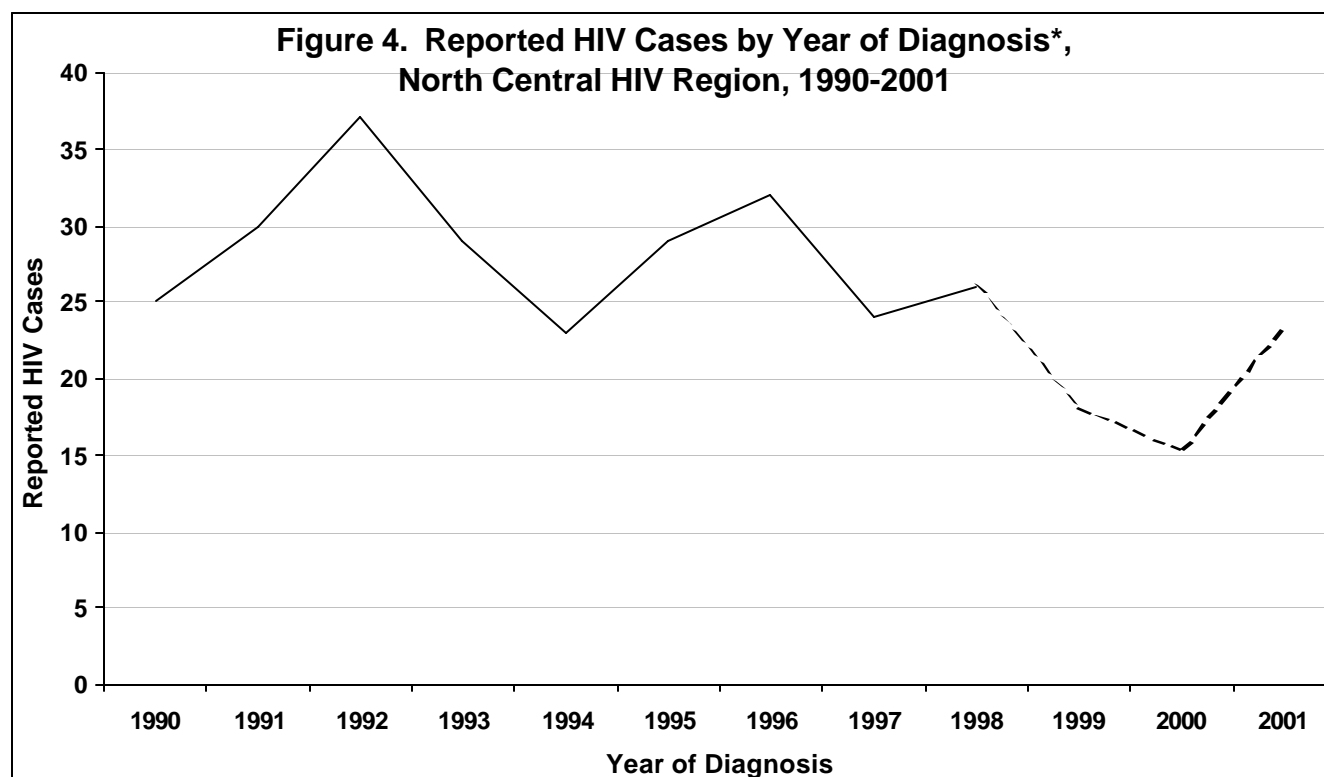
- The 32 HIV Disease cases initially reported in North Central HIV Region residents in 2001 represent a 3.2% increase from the 31 cases reported in 2000. (see Figure 1 on page 187). The annual number of initially reported HIV Disease cases has remained stable at 31-33 reported cases for each of the past five years.
- The 17 AIDS cases reported in 2001 represented a 26.1% decrease from the 23 cases reported in 2000 (see Figure 2 on page 188).
- From 2000 to 2001, the number of reported AIDS cases in whites decreased by 43.8% (from 16 cases reported in 2000 to 9 cases in 2001), while the number of reported cases in blacks increased by 16.7% (from 6 cases reported in 2000 to 7 cases in 2001). See Figure 3.
- Comparing reported HIV cases (which generally represent persons more recently infected with HIV) with reported AIDS cases (which generally represent persons less recently infected) is a potential means of discerning which groups are increasingly becoming involved in the epidemic.
 - As indicated in Table 1 (page 189), a somewhat higher proportion of cumulative HIV cases, compared to cumulative AIDS cases, tend to be female and black, providing some evidence that among more recently infected persons a slightly larger proportion may be female and black.
 - In Table 2, cases currently placed in the "Other/Unknown" exposure category have been reassigned to a specific exposure category (such as MSM or heterosexual contact) based on past experience in reassigning such cases following investigation. As a result, HIV and AIDS cases can be better compared with regard to involvement in the epidemic by persons in different exposure categories. The data contained in Table 2 indicate that a higher proportion of cumulative HIV cases, compared to cumulative AIDS cases, are heterosexual contacts. This provides some evidence that among more recently infected persons, a larger proportion are heterosexual contacts. (However, the largest number of new infections may well continue to result from male homosexual contact.)
- Figure 4 shows reported HIV cases[†] by year of diagnosis^{††} for the period from 1990-2001. The annual number of diagnosed cases generally decreased during the period from 1992 to 2000. In 2001, the number of diagnosed cases is estimated to have increased by about 8 cases from the number reported the preceding year.
- Figures 5-7 show reported HIV cases[†] by year of diagnosis^{††} according to gender, race/ethnicity, and exposure category. Care should be exercised in interpreting these graphs (and the similar graphs which follow) given the relatively small numbers of cases, and the fact that the numbers for more recent years are estimates that attempt to adjust for reporting delays.



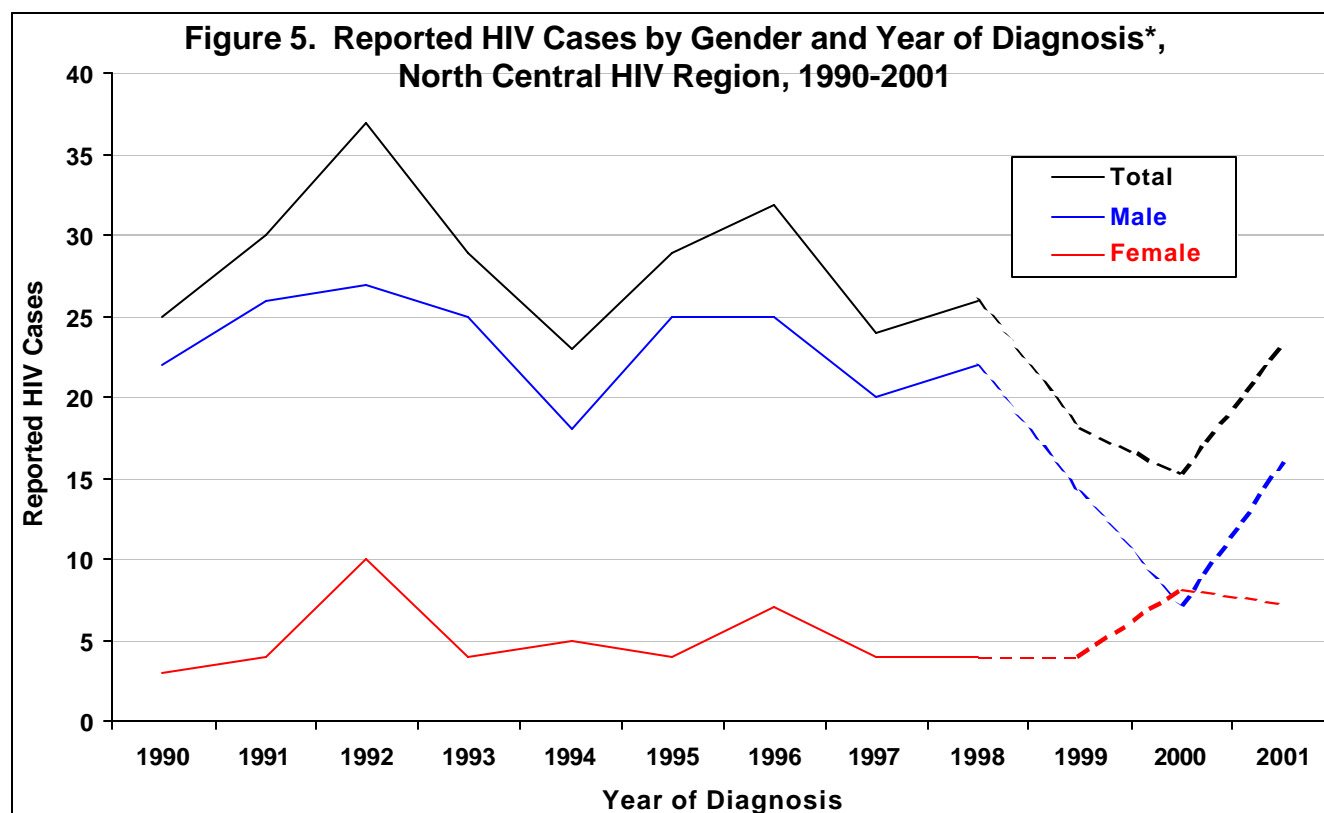
[†] The HIV cases shown in Figures 4-7 represent individuals who were HIV cases (i.e., HIV infected but not AIDS) at the time of initial diagnosis of HIV infection. Some of these individuals have subsequently progressed to AIDS, while the rest currently remain HIV cases. However, in these figures, where the emphasis is on status at the time of initial diagnosis, all are considered HIV cases. (This is in contrast to the way data is presented in Table 1 and similar tables. In these tables, once an individual who is an HIV case meets the case definition for AIDS, he or she is no longer counted as an HIV case, and instead is counted as an AIDS case.)

^{††} Adjustments were made for delays in reporting of cases. That is, for more recent years, not all cases diagnosed during these years have been reported as yet. To adjust for this, estimates were made, based on past experience, of the additional number of cases expected to ultimately be reported, and these expected cases were added to those already reported to give the estimated total number of cases for a given year as shown in the figure.

HIV Disease Epi Profile Summary: North Central HIV Region

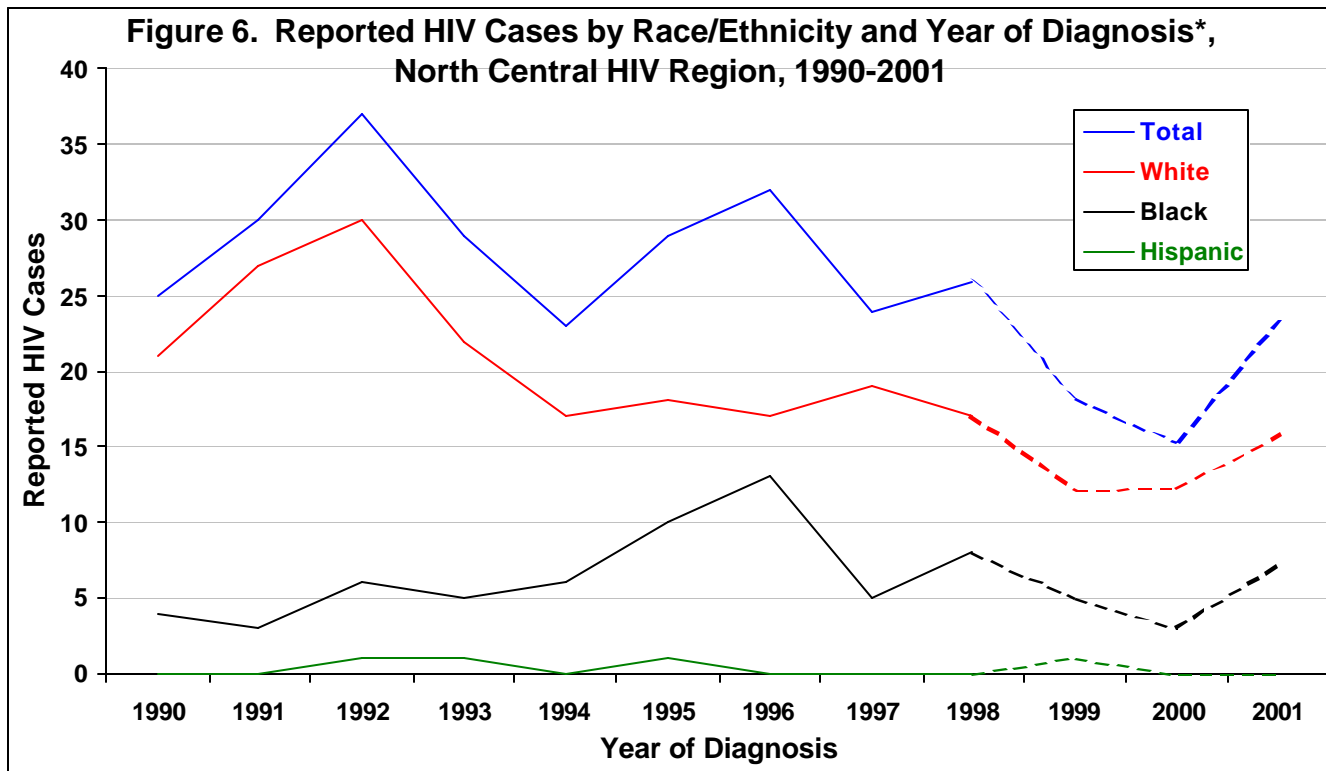


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

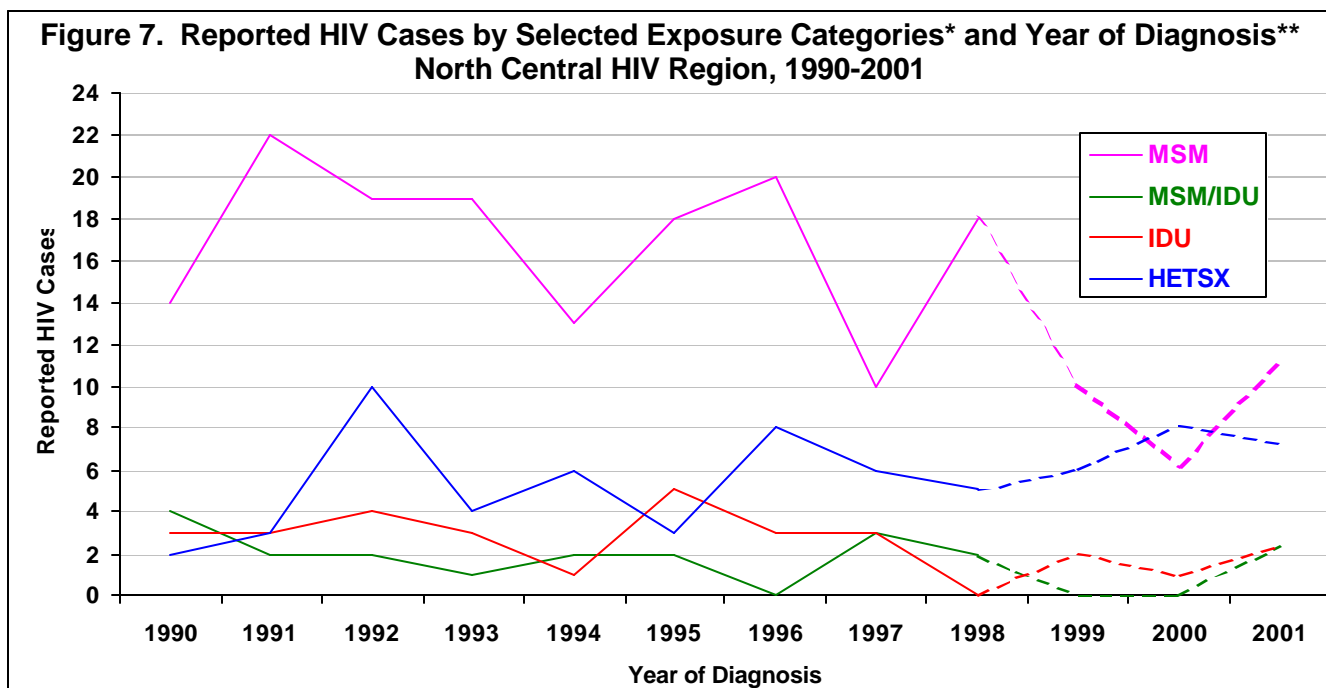


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: North Central HIV Region



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*MSM = men who have sex with men; MSM/IDU = men who have sex with men and inject drugs; IDU = injecting drug user; HETSEX = heterosexual contact. Cases currently classified as "Risk Not Specified" (RNS), many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in diagnosed HIV cases. The proportion assigned to a given exposure category is based on past experience with RNS cases whose exposure risk has been discovered following investigation. Such experience indicates that almost all RNS cases whose exposure risk is eventually determined will be placed in one of the four exposure categories shown in this figure.

**Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: North Central HIV Region

Men Who Have Sex With Men (MSM)

Magnitude of the Problem

- From 1984 through 2001, a total of 313 HIV Disease cases in MSM have been reported in North Central HIV Region residents (these cases make up 55.1% of all reported adult/adolescent HIV Disease cases in the region). Of these 313 HIV Disease cases, 212 (67.7%) are AIDS cases and 101 (32.3%) are HIV cases.
- The 212 AIDS cases make up 56.2% of all reported adult/adolescent AIDS cases in the region. In 2001, of the 17 adult/adolescent AIDS cases reported, 10 (58.8%) were in MSM.
- The 101 HIV cases make up 52.9% of total reported adult/adolescent HIV cases in the region. In 2001, of the 21 adult/adolescent HIV cases reported, 7 (33.3%) were in MSM.
- These numbers, however, do not quite reflect the full extent of MSM involvement since for 13 adult/adolescent AIDS cases, and 18 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 189). Here it is estimated that approximately 219 (58.1%) of the 377 total reported adult/adolescent AIDS cases, [and approximately 10 (58.8%) of the 17 adult/adolescent AIDS cases reported in 2001] were in MSM. Likewise, it is estimated that approximately 105 (55.0%) of the 191 total reported adult/adolescent HIV cases, [and approximately 8 (38.1%) of the 21 adult/adolescent HIV cases reported in 2001] were in MSM.

Who

- Table 5 shows reported HIV and AIDS cases in MSM by race/ethnicity.
- Of total reported HIV cases among MSM, white men comprise 75.2% and black men 20.8%.
- White men comprise 84.0% of total reported AIDS cases among MSM and black men make up 14.2%.
- Table 6 shows reported HIV cases in MSM by race/ethnicity and age group. Among white MSM, the largest proportion of reported HIV cases (53.9%) were in men 20-29 years of age at the time of initial diagnosis. Among black MSM, the largest proportion of cases (38.1%) were in men 20-29 and 30-39 years of age at the time of diagnosis.
- Information obtained through interviews with reported MSM HIV and AIDS cases indicates that at least 29% of these men (24% of white men and 57% of black men) have, in addition to having sex with other men, also had sex with females. (Note that the actual percentages could be higher because complete information may not have been obtained on all reported cases.)

Where

- Of the 101 total HIV cases reported in MSM, 63 (62.4%) were from the Boone County, and 10 (9.9%) were from Cole County. The remaining cases were from 16 other counties in the HIV region (each of these counties reported 1-6 cases).
- Table 7 shows reported HIV cases in MSM by race/ethnicity and geographic area. Of total MSM cases reported from Boone County and Cole County, black men make up 22.2% and 20.0%, respectively.

Trends

- The annual number of diagnosed HIV cases in MSM has generally been slowly decreasing since 1991, although the estimated number of diagnosed cases in 2001 was increased slightly from the preceding year. Figure 8 shows reported HIV cases in MSM by race/ethnicity and year of diagnosis.

HIV Disease Epi Profile Summary: North Central HIV Region

Table 5. Reported HIV and AIDS Cases in Men Who Have Sex With Men by Race/Ethnicity, North Central HIV Region, Cumulative Through December 2001

Race/Ethnicity	HIV Cases Cumulative		AIDS Cases Cumulative	
	Case	%	Case	%
White	76	(75.2%)	178	(84.0%)
Black	21	(20.8%)	30	(14.2%)
Other/Unknown	4	(4.0%)	4	(1.9%)
North Central HIV Region Total	101	(100.0%)	212	(100.0%)

Table 6. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Age Group, North Central HIV Region, Cumulative Through December 2001

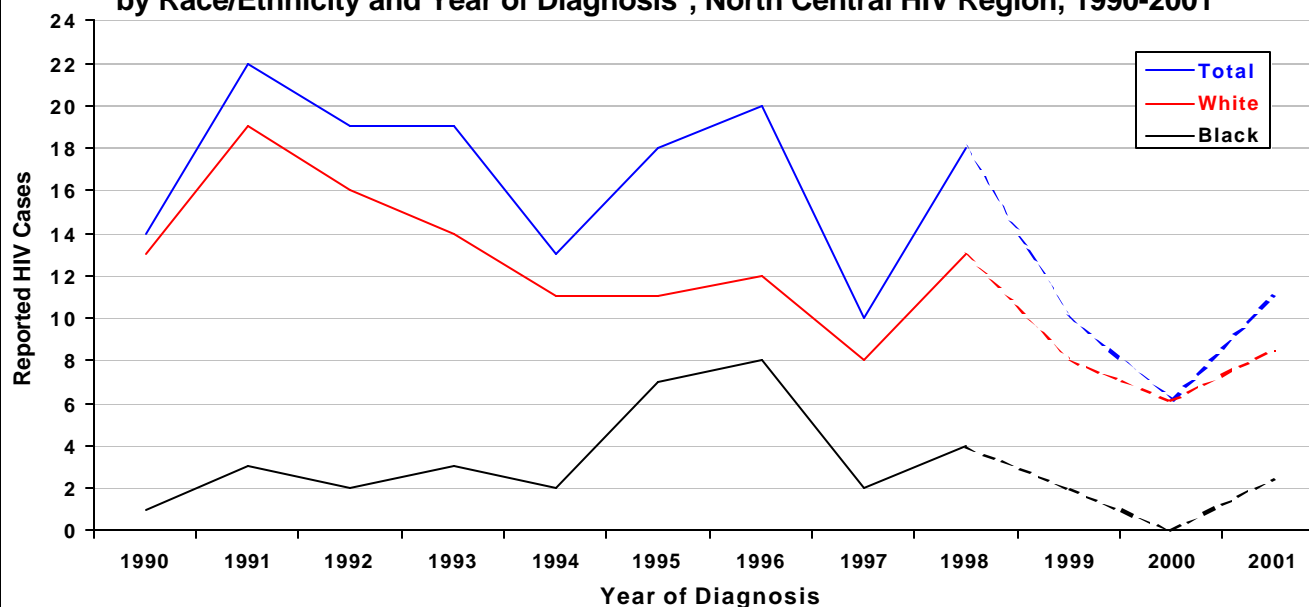
Age Group	White		Black		Total	
	Cases	%	Cases	%	Cases	%
13-19	1	(1.3%)	3	(14.3%)	4	(4.0%)
20-29	41	(53.9%)	8	(38.1%)	51	(50.5%)
30-39	26	(34.2%)	8	(38.1%)	35	(34.7%)
40-49	6	(7.9%)	2	(9.5%)	8	(7.9%)
50+	2	(2.6%)	0	(0.0%)	3	(3.0%)
North Central HIV Region Total	76	(100.0%)	21	(100.0%)	101	(100.0%)

Table 7. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Geographic Area, North Central HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Total	
	Cases	%	Cases	%	Cases	%
Boone County	46	(73.0%)	14	(22.2%)	63	(100.0%)
Cole County	8	(80.0%)	2	(20.0%)	10	(100.0%)
Remaining Counties	22	(78.6%)	5	(17.9%)	28	(100.0%)
North Central HIV Region Total	76	(75.2%)	21	(20.8%)	101	(100.0%)

NOTE: Row percentages are shown.

Figure 8. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Year of Diagnosis*, North Central HIV Region, 1990-2001



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: North Central HIV Region

Men Who Have Sex With Men and Inject Drugs (MSM/IDU)

Magnitude of the Problem

- From 1984 through 2001, a total of 36 HIV Disease cases in MSM/IDUs have been reported in North Central HIV Region residents (these cases make up 6.3% of all reported adult/adolescent HIV Disease cases in the region). Of these 36 HIV Disease cases, 27 (75.0%) are AIDS cases and 9 (25.0%) are HIV cases.
- The 27 AIDS cases make up 7.2% of all reported adult/adolescent AIDS cases in the region.
- The 9 HIV cases make up 4.7% of total reported adult/adolescent HIV cases in the region.

Who

- Table 8 shows reported HIV and AIDS cases in MSM/IDUs by race/ethnicity.
- Of the 9 total reported HIV cases among MSM/IDUs, white men comprise 88.9%, and black men make up 11.1%.
- White men comprise 85.2% of the 27 total reported AIDS cases among MSM/IDUs and black men make up 14.8%.
- Table 9 shows reported HIV cases in MSM/IDUs by age group. The largest proportion of reported HIV cases (55.6%) were in men 20-29 years of age at the time of initial diagnosis.
- Information obtained through interviews with reported MSM/IDU HIV and AIDS cases indicates that at least 33% of these men have, in addition to having sex with other men, also had sex with females. (Note that the actual percentages could be higher because complete information may not have been obtained on all reported cases.)

Where

- The 9 total HIV cases reported in MSM/IDUs were from 5 counties; each county reported 1-3 cases.
- Table 10 shows reported HIV cases in MSM/IDUs by geographic area.

Trends

- Since the early 1990s, from 0-3 HIV cases have been diagnosed each year in MSM/IDUs.

HIV Disease Epi Profile Summary: North Central HIV Region

Table 8. Reported HIV and AIDS Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity, North Central HIV Region, Cumulative Through December 2001

Race/Ethnicity	HIV Cases Cumulative		AIDS Cases Cumulative	
	Case	%	Case	%
White	8	(88.9%)	23	(85.2%)
Black	1	(11.1%)	4	(14.8%)
North Central HIV Region Total	9	(100.0%)	27	(100.0%)

Table 9. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity and Age Group, North Central HIV Region, Cumulative Through December 2001

Age Group	Total	
	Cases	%
13-19	0	(0.0%)
20-29	5	(55.6%)
30-39	2	(22.2%)
40+	2	(22.2%)
North Central HIV Region Total	9	(100.0%)

Table 10. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Geographic Area, North Central HIV Region, Cumulative Through December 2001

The 9 total HIV cases reported in MSM/IDUs were from 5 counties;
each county reported 1-3 cases.

North Central HIV Region Total 9 **(100.0%)**

HIV Disease Epi Profile Summary: North Central HIV Region

Injecting Drug Users (IDUs)

Magnitude of the Problem

- From 1984 through 2001, a total of 43 HIV Disease cases in IDUs[†] have been reported in North Central HIV Region residents (these cases make up 7.6% of all reported adult/adolescent HIV Disease cases in the region). Of these 43 HIV Disease cases, 24 (55.8%) are AIDS cases and 19 (44.2%) are HIV cases.
- The 24 AIDS cases make up 6.4% of all reported adult/adolescent AIDS cases in the region.
- The 19 HIV cases make up 9.9% of total reported adult/adolescent HIV cases in the region.

Who

- Table 11 shows reported HIV and AIDS cases in IDUs by race/ethnicity and gender.
- White males comprise 68.4% of the 19 reported HIV cases among IDUs, white females make up 26.3%, and black males 5.3%. There have not been any reported black female cases.
- White males comprise 37.5% of the 24 reported AIDS cases among IDUs, black males make up 33.3%, white females 20.8%, and black females 8.3%.
- Table 12 shows reported HIV cases in IDUs by age group. The largest proportion of reported HIV cases (63.2%) were in persons 30-39 years of age at the time of initial diagnosis.

Where

- Of the 19 total HIV cases reported in IDUs, 6 (31.6%) were from Boone County. The remaining 13 cases were from 9 other counties in the region (each of these counties reported 1-3 cases).
- Table 13 shows reported HIV cases in IDUs by geographic area.

Trends

- During each of the past 6 years, from 0-3 HIV cases have been diagnosed each year in IDUs.

[†] Each male IDU case denied any homosexual contact; if such contact had been reported, the case would have been placed in the men who have sex with men and inject drugs [MSM/IDU] exposure category.

HIV Disease Epi Profile Summary: North Central HIV Region

Table 11. HIV and AIDS Cases in Injecting Drug Users by Race/Ethnicity and Gender, North Central HIV Region, Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases Cumulative		AIDS Cases Cumulative	
	Cases	%	Cases	%
White Male	13	(68.4%)	9	(37.5%)
Black Male	1	(5.3%)	8	(33.3%)
White Female	5	(26.3%)	5	(20.8%)
Black Female	0	(0.0%)	2	(8.3%)
North Central HIV Region Total	19	(100.0%)	24	(100.0%)

Table 12. Reported HIV Cases in Injecting Drug Users by Age Group, North Central HIV Region, Cumulative Through December 2001

Age Group	Total	
	Cases	%
13-19	0	(0.0%)
20-29	4	(21.1%)
30-39	12	(63.2%)
40+	3	(15.8%)
North Central HIV Region Total	19	(100.0%)

Table 13. Reported HIV Cases in Injecting Drug Users by Geographic Area, North Central HIV Region, Cumulative Through December 2001

Geographic Area	Total	
	Cases	%
Boone County	6	(31.6%)
Remaining Counties	13	(68.4%)
North Central HIV Region Total	19	(100.0%)

HIV Disease Epi Profile Summary: North Central HIV Region

Heterosexual Contacts

Magnitude of the Problem

- From 1984 through 2001, a total of 99 HIV Disease cases in heterosexual contacts have been reported in North Central HIV Region residents (these cases make up 17.4% of all reported adult/adolescent HIV Disease cases in the region). Of these 99 HIV Disease cases, 58 (58.6%) are AIDS cases and 41 (41.4%) are HIV cases.
- The 58 AIDS cases make up 15.4% of all reported adult/adolescent AIDS cases in the region. In 2001, of the 17 adult/adolescent AIDS cases reported, 2 (11.8%) were in heterosexual contacts.
- The 41 HIV cases make up 21.5% of total reported adult/adolescent HIV cases in the region. In 2001, of the 21 adult/adolescent HIV cases reported, 2 (9.5%) were in heterosexual contacts.
- These numbers, however, do not completely indicate the extent of heterosexual contact involvement since for 13 adult/adolescent AIDS cases, and 18 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the “Other/Unknown” exposure category. If these cases were all assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with “Other/Unknown” cases whose exposure category was determined following investigation, the result would be that seen in Table 2 on page 189. Here it is estimated that approximately 63 (16.7%) of the 377 total reported adult/adolescent AIDS cases [and approximately 4 (23.5%) of the 17 adult/adolescent AIDS cases reported in 2001] were in heterosexual contacts. Likewise, it is estimated that approximately 52 (27.2%) of the 191 total reported adult/adolescent HIV cases [and approximately 9 (42.9%) of the 21 adult/adolescent HIV cases reported in 2001] were in heterosexual contacts.

Who

- Table 14 shows reported HIV and AIDS cases in heterosexual contacts by race/ethnicity and gender.
- White females comprise 41.5% of the 41 total reported HIV cases among heterosexual contacts; black females make up 29.3%; white males 14.6%; and black males 12.2%.
- White females comprise 56.9% of the 58 total reported AIDS cases among heterosexual contacts; black females make up 15.5%; white males 15.5%; and black males 8.6%.
- Table 15 shows reported HIV cases in heterosexual contacts by race/ethnicity, and age group. The largest proportion of reported HIV cases (43.9%) were in persons 20-29 years of age at the time of initial diagnosis.

Where

- Of the 41 total HIV cases reported in heterosexual contacts, 13 (31.7%) were from Boone County and 5 (12.2%) from Cole County. Twenty-three other cases were reported from 15 additional counties in the region (each of these counties reported 1-3 cases).
- Table 16 shows reported HIV cases in heterosexual contacts by race/ethnicity and geographic area.

Trends

- As indicated in Table 2 (on page 189, a higher proportion of cumulative HIV cases (27.2%), compared to cumulative AIDS cases (16.7%), appear to be heterosexual contacts, providing some evidence that among more recently infected persons a larger proportion may be heterosexual contacts.
- The annual number of diagnosed HIV cases in heterosexual contacts has remained generally steady in recent years. During each of the past 6 years, from 5-8 HIV cases have been diagnosed each year in heterosexual contacts. Figure 9 shows reported HIV cases in heterosexual contacts by race/ethnicity and year of diagnosis.

HIV Disease Epi Profile Summary: North Central HIV Region

Table 14. Reported HIV and AIDS Cases in Heterosexual Contacts by Race/Ethnicity and Gender, North Central HIV Region, and Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases Cumulative		AIDS Cases Cumulative	
	Cases	%	Cases	%
White Male	6	(14.6%)	9	(15.5%)
Black Male	5	(12.2%)	5	(8.6%)
White Female	17	(41.5%)	33	(56.9%)
Black Female	12	(29.3%)	9	(15.5%)
North Central HIV Region Total	41	(100.0%)	58	(100.0%)

Table 15. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Age Group, North Central HIV Region, Cumulative Through December 2001

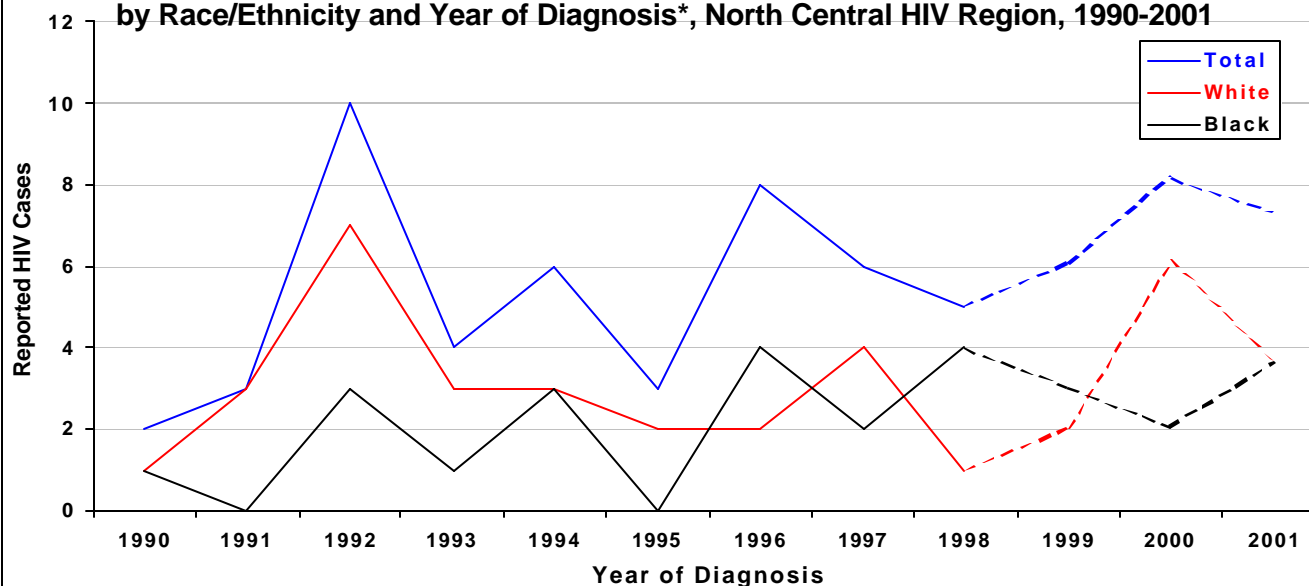
Age Group	White		Black		Total	
	Cases	%	Cases	%	Cases	%
13-19	2	(8.7%)	1	(5.9%)	3	(7.3%)
20-29	11	(47.8%)	6	(35.3%)	18	(43.9%)
30-39	5	(21.7%)	8	(47.1%)	13	(31.7%)
40-49	4	(17.4%)	1	(5.9%)	5	(12.2%)
50+	1	(4.3%)	1	(5.9%)	2	(4.9%)
North Central HIV Region Total	23	(100.0%)	17	(100.0%)	41	(100.0%)

Table 16. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Geographic Area, North Central HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Total	
	Cases	%	Cases	%	Cases	%
Boone County	5	(38.5%)	8	(61.5%)	13	(100.0%)
Cole County	2	(40.0%)	2	(40.0%)	5	(100.0%)
Remaining Counties	16	(69.6%)	7	(30.4%)	23	(100.0%)
North Central HIV Region Total	23	(56.1%)	17	(41.5%)	41	(100.0%)

NOTE: Row percentages are shown.

Figure 9. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Year of Diagnosis*, North Central HIV Region, 1990-2001



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

STD Epi Profile Summary: North Central HIV Region

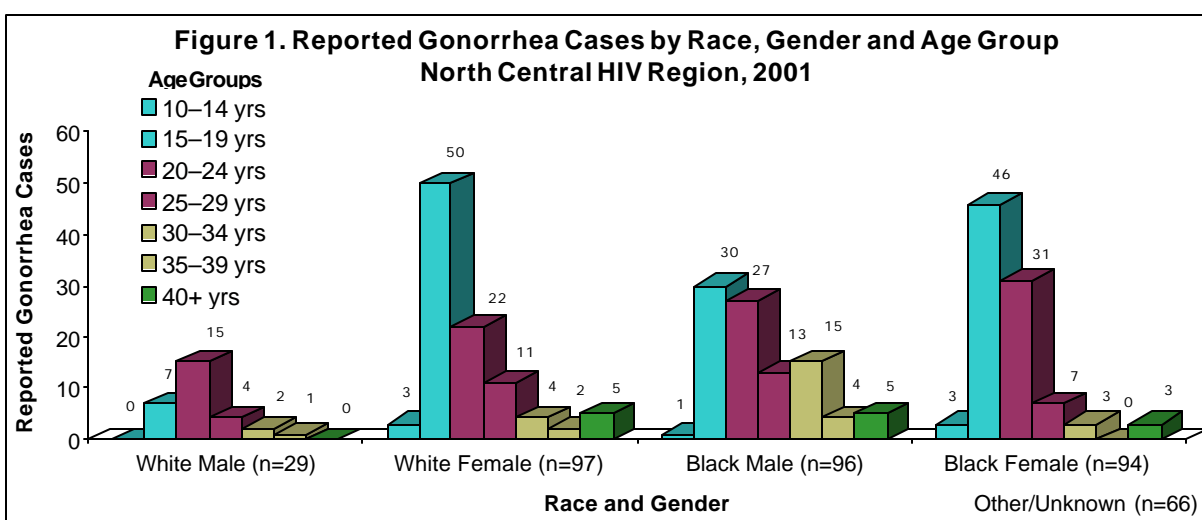
Gonorrhea

Magnitude of the Problem

- During 2001, 382 cases of gonorrhea were reported in the North Central HIV Region; the corresponding rate* was 56.0 cases per 100,000 population.

Who

- Of the 382 gonorrhea cases reported in 2001, 150 (39.3%) were in males and 232 (60.7%) were in females. Among whites, a higher proportion of cases were reported in females (77.0%) than in males (23.0%). Among blacks, a higher proportion of cases were reported in males (50.5%) than in females (49.5%).
- Of the 382 gonorrhea cases reported in 2001, 126 (33.0%) were in whites and 190 (49.7%) were in blacks. Five (1.3%) cases were in another racial group, and for 61 (16.0%) cases, race was unknown.
- The rate* of reported cases in blacks (541.4) was about 27 times the rate* in whites (19.9).
- Table 1 on page 203 shows the numbers and rates of reported gonorrhea cases by race.
- Of the 382 gonorrhea cases reported in 2001, 157 (41.1%) were in teenagers. Teenagers made up 49 (52.1%) of the 94 black female cases, 53 (54.6%) of the 97 white female cases, 30 (31.3%) of the 96 black male cases, and 7 (24.1%) of the 29 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 382 gonorrhea cases reported, 141 (36.9%) were from Boone County, 55 (14.4%) were from Cole County, and 36 (9.4%) were from Pettis County. The remaining counties in the region each had from 0-24 cases reported. Cases were reported from 26 (78.8%) of the region's 33 counties. Table 2 shows the number and percentage of cases reported from each county. Figure 2 is a map showing cases by county.
- The highest rate* of reported gonorrhea cases in 2001 was in Boone County (108.3). Table 2 shows rates of reported cases for the region's counties. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported gonorrhea cases by race from 1992-2001. The 382 gonorrhea cases reported in 2001 represented a 17.1% decrease from the 461 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: North Central HIV Region

Table 1. Reported Gonorrhea Cases and Rates by Race, North Central HIV Region, 2001

	Cases	%	Rate*
Whites	126	33.0%	19.9
Blacks	190	49.7%	541.4
Other/Unknown	66	17.3%	—
Total Cases	382	100.0%	56.0

Table 2. Reported Gonorrhea Cases and Rates by Selected Counties, North Central HIV Region, 2001

	Cases	%	Rate*
Boone	141	36.9%	108.3
Cole	55	14.4%	79.1
Pettis	36	9.4%	97.0
Randolph	24	6.3%	100.6
Marion	28	7.3%	101.0
Callaway	21	5.5%	55.4
Audrain	11	2.9%	46.9
Saline	9	2.4%	39.5
Total Cases	382	100.0%	56.0

*Per 100,000 population

Figure 2. Reported Gonorrhea Cases by County North Central HIV Region, 2001

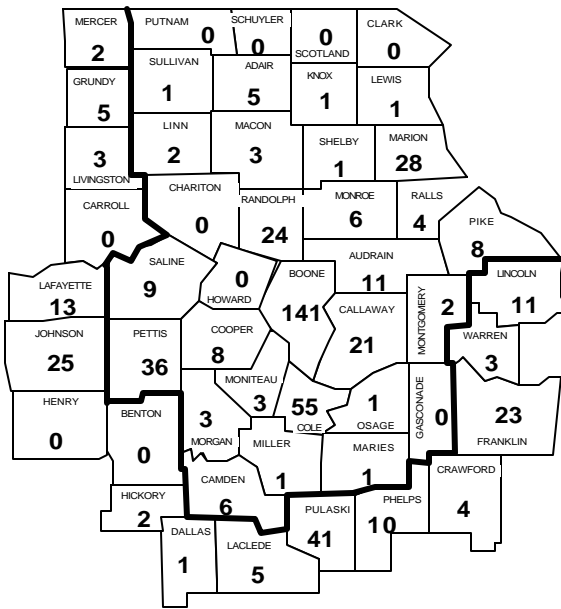


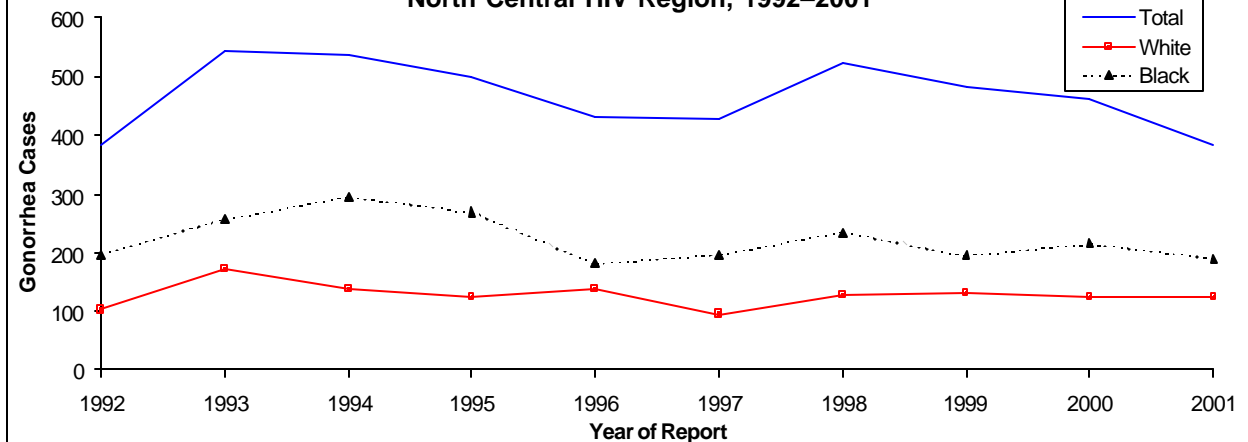
Table 3. Reported Gonorrhea Cases and Rates by Race and County, North Central HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Boone County	141	100.0%	108.3	24	17.0%	21.6	98	69.5%	848.7
Cole County	55	100.0%	79.1	19	34.5%	30.5	29	52.7%	496.1
Pettis County	36	100.0%	97.0	15	41.7%	43.0	18	50.0%	1177.2
Randolph County	24	100.0%	100.6	15	62.5%	70.5	7	29.2%	325.6
Marion County	28	100.0%	101.0	12	42.9%	46.5	9	32.1%	594.1
Callaway County	21	100.0%	55.4	5	23.8%	14.3	8	38.1%	345.1
Audrain County	11	100.0%	46.9	2	18.2%	9.3	2	18.2%	112.7
Saline County	9	100.0%	39.5	3	33.3%	14.4	4	44.4%	250.0
North Central HIV Reg	382	100.0%	56.0	126	33.0%	19.9	190	49.7%	541.4

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

Figure 3. Reported Gonorrhea Cases by Race and Year of Report North Central HIV Region, 1992–2001



STD Epi Profile Summary: North Central HIV Region

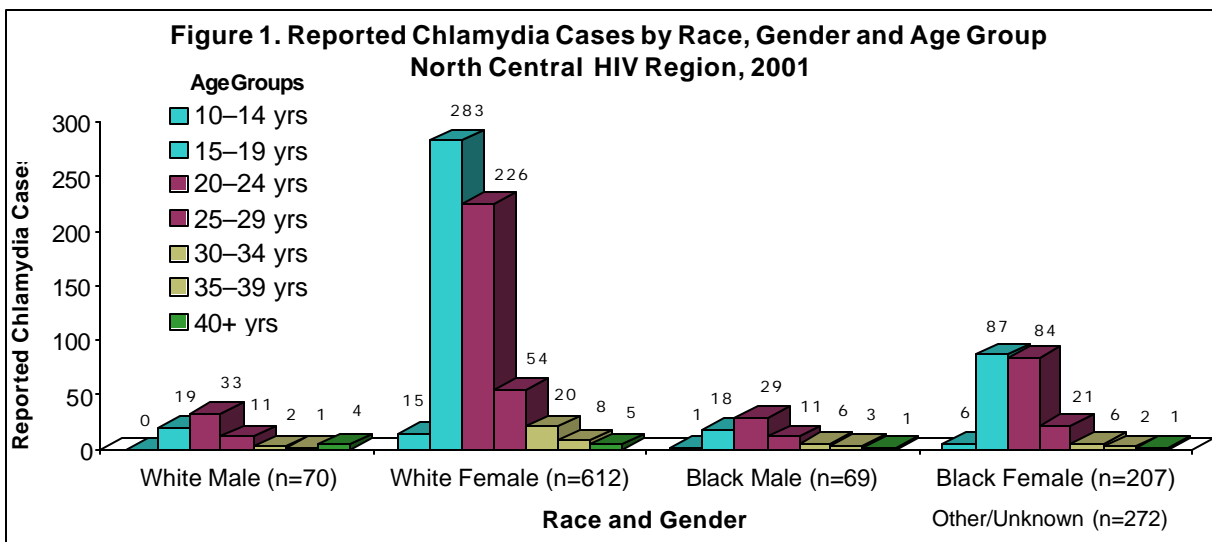
Chlamydia

Magnitude of the Problem

- During 2001, 1,230 cases of chlamydia were reported in the North Central HIV Region; the corresponding rate* was 180.3 cases per 100,000 population.

Who

- Of the 1,230 chlamydia cases reported in 2001, 194 (15.8%) were in males and 1,036 (84.3%) were in females. Among whites, a higher proportion of cases were reported in females (89.7%) than in males (10.3%). Among blacks, a higher proportion of cases were also reported in females (75.0%) than in males (20.2%).
- Of the 1,230 chlamydia cases reported in 2001, 682 (55.4%) were in whites and 276 (22.4%) were in blacks. Twenty-six (2.1%) cases were in other racial groups, and for 246 (20.0%) cases, race was unknown.
- The rate* of reported cases in blacks (786.5) was about 7 times the rate* in whites (107.9).
- Table 1 on page 205 shows the numbers and rates of reported chlamydia cases by race.
- Of the 1,230 chlamydia cases reported in 2001, 530 (43.1%) were in teenagers. Teenagers made up 93 (44.9%) of the 207 black female cases, 296 (48.4%) of the 612 white female cases, 19 (27.5%) of the 69 black male cases, and 19 (27.1%) of the 70 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 1,230 chlamydia cases reported, 406 (33.0%) were from Boone County, 175 (14.2%) from Cole County, 85 (6.9%) from Callaway County, and 81 (6.6%) from Pettis County. The remaining counties in the region each had from 0-56 cases reported. Cases were reported from 32 of the region's counties. Table 2 shows the number and percentage of cases reported from those counties having the largest numbers of cases. Figure 2 is a map showing cases by county.
- The highest rate* of reported chlamydia cases in 2001 was in Boone County (311.9). Table 2 shows rates of reported cases for counties with the most cases. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported chlamydia cases by race from 1992-2001. The 1,230 cases reported in 2001 represented a 0.2% increase from the 1,228 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: North Central HIV Region

Table 1. Reported Chlamydia Cases and Rates by Race, North Central HIV Region, 2001

	Cases	%	Rate*
Whites	682	55.4%	107.9
Blacks	276	22.4%	786.5
Other/Unknown	272	22.1%	-
Total Cases	1,230	100.0%	180.3

Table 2. Reported Chlamydia Cases and Rates by Selected Counties, North Central HIV Region, 2001

	Cases	%	Rate*
Boone	406	33.0%	311.9
Cole	175	14.2%	251.8
Callaway	85	6.9%	224.3
Pettis	81	6.6%	218.3
Marion	56	4.6%	202.0
Audrain	52	4.2%	221.8
Adair	45	3.7%	186.0
Saline	37	3.0%	162.4
Randolph	31	2.5%	129.9
Miller	26	2.1%	114.9
Cooper	25	2.0%	154.8
Total Cases	1,230	100.0%	180.3

*Per 100,000 population

Figure 2. Reported Chlamydia Cases by County North Central HIV Region, 2001

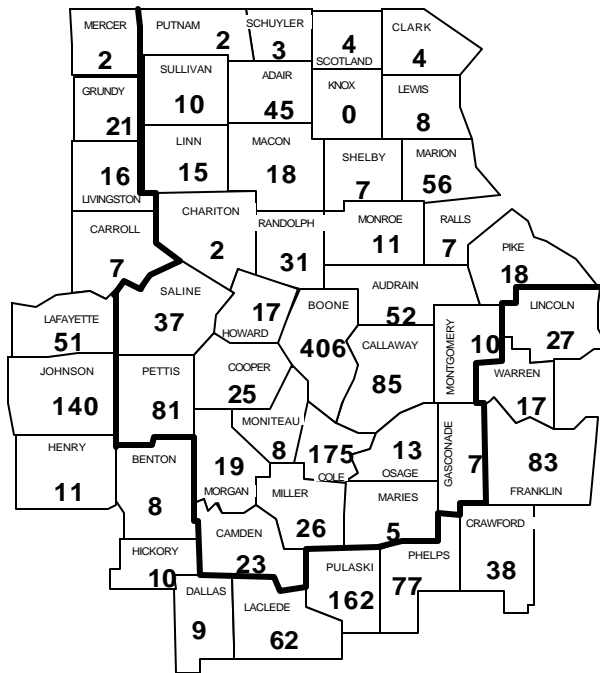


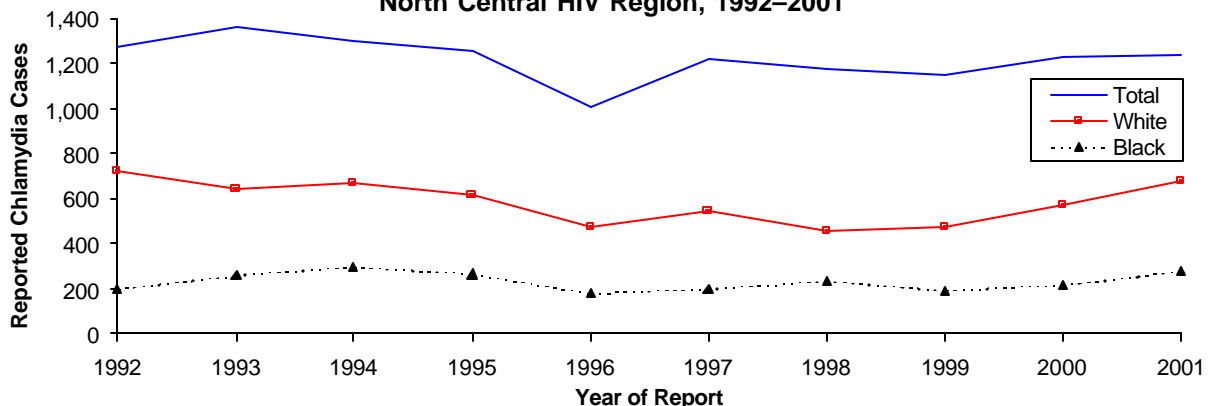
Table 3. Reported Chlamydia Cases and Rates by Race and County, North Central HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Boone County	406	100.0%	311.9	175	43.1%	157.2	136	33.5%	1177.8
Cole County	175	100.0%	251.8	84	48.0%	134.8	57	32.6%	975.0
Callaway County	85	100.0%	224.3	44	51.8%	125.7	17	20.0%	733.4
Pettis County	81	100.0%	218.3	52	64.2%	148.9	13	16.0%	850.2
Marion County	56	100.0%	202.0	37	66.1%	143.4	12	21.4%	792.1
Audrain County	52	100.0%	221.8	34	65.4%	158.9	11	21.2%	619.7
Adair County	45	100.0%	186.0	32	71.1%	136.9	2	4.4%	784.3
Saline County	37	100.0%	162.4	25	67.6%	120.2	4	10.8%	250.0
Randolph County	31	100.0%	129.9	24	77.4%	112.8	3	9.7%	139.5
Miller County	26	100.0%	114.9	17	65.4%	76.3	0	0.0%	0.0
Cooper County	25	100.0%	154.8	10	40.0%	69.9	5	20.0%	313.9
North Central HIV Region	1,230	100.0%	180.3	682	55.4%	107.9	276	22.4%	786.5

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

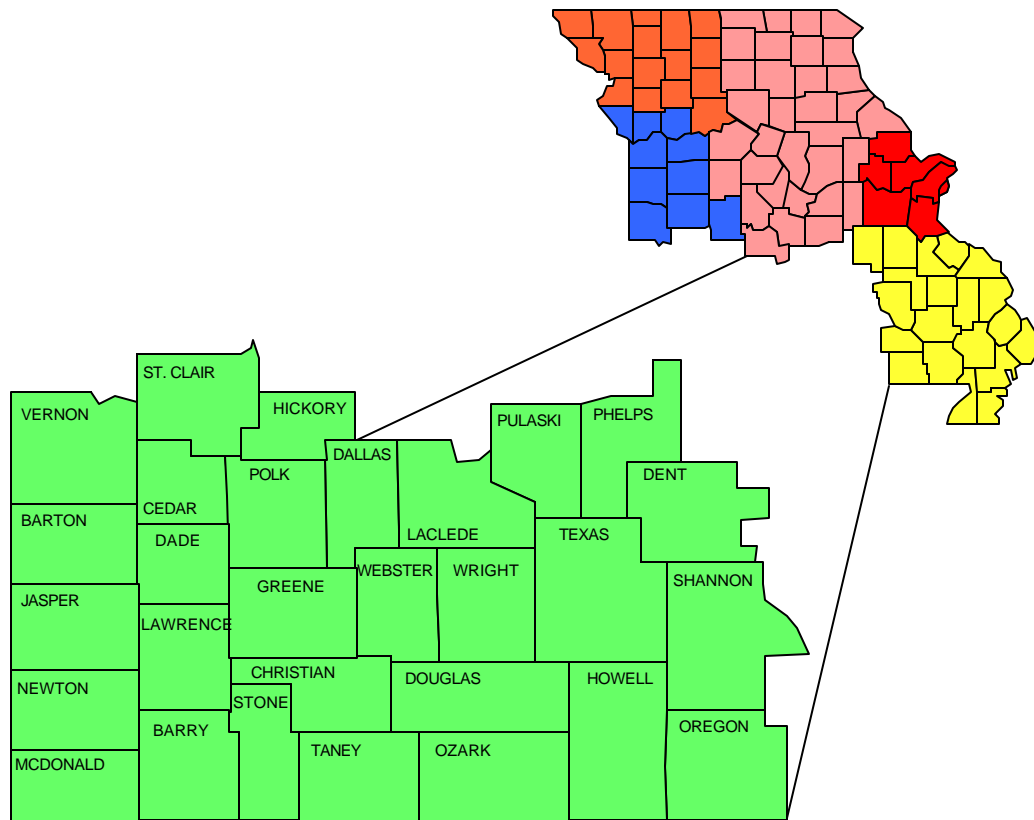
Figure 3. Reported Chlamydia Cases by Race and Year of Report North Central HIV Region, 1992–2001



STD Epi Profile Summary: North Central HIV Region

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Southwest HIV Region



1999 Population Estimates for the Southwest HIV Region

County	White		African American		American Indian		Asian/Pacific Is		Hispanic		Total	
Barry County	32,455	97.8%	37	0.1%	288	0.9%	139	0.4%	270	0.8%	33,189	100.0%
Barton County	11,879	97.9%	17	0.1%	94	0.8%	43	0.4%	100	0.8%	12,133	100.0%
Cedar County	13,171	98.3%	7	0.1%	83	0.6%	33	0.2%	101	0.8%	13,395	100.0%
Christian County	50,310	98.0%	120	0.2%	269	0.5%	172	0.3%	482	0.9%	51,353	100.0%
Dade County	7,719	97.2%	26	0.3%	61	0.8%	19	0.2%	114	1.4%	7,939	100.0%
Dallas County	15,292	98.2%	32	0.2%	95	0.6%	34	0.2%	117	0.8%	15,570	100.0%
Dent County	14,002	98.2%	22	0.2%	59	0.4%	45	0.3%	129	0.9%	14,257	100.0%
Douglas County	12,172	98.0%	6	0.0%	87	0.7%	25	0.2%	131	1.1%	12,421	100.0%
Greene County	215,814	95.1%	4,857	2.1%	1,231	0.5%	2,332	1.0%	2,768	1.2%	227,002	100.0%
Hickory County	8,592	98.4%	8	0.1%	62	0.7%	11	0.1%	55	0.6%	8,728	100.0%
Howell County	35,393	98.1%	92	0.3%	171	0.5%	138	0.4%	276	0.8%	36,070	100.0%
Jasper County	95,203	94.9%	1,567	1.6%	1,504	1.5%	718	0.7%	1,275	1.3%	100,267	100.0%
Laclede County	30,739	97.8%	148	0.5%	156	0.5%	136	0.4%	240	0.8%	31,419	100.0%
Lawrence County	32,726	97.7%	44	0.1%	281	0.8%	99	0.3%	344	1.0%	33,494	100.0%
McDonald County	19,271	95.6%	8	0.0%	595	3.0%	75	0.4%	209	1.0%	20,158	100.0%
Newton County	47,580	95.7%	269	0.5%	941	1.9%	361	0.7%	563	1.1%	49,714	100.0%
Oregon County	10,175	98.8%	7	0.1%	40	0.4%	22	0.2%	51	0.5%	10,295	100.0%
Ozark County	9,804	98.3%	11	0.1%	41	0.4%	20	0.2%	94	0.9%	9,970	100.0%
Phelps County	36,702	94.2%	506	1.3%	138	0.4%	1,142	2.9%	466	1.2%	38,954	100.0%
Polk County	25,090	97.5%	116	0.5%	128	0.5%	122	0.5%	284	1.1%	25,740	100.0%
Pulaski County	28,738	75.2%	5,284	13.8%	202	0.5%	1,526	4.0%	2,480	6.5%	38,230	100.0%
Shannon County	8,224	99.1%	4	0.0%	25	0.3%	6	0.1%	39	0.5%	8,298	100.0%
St. Clair County	9,143	98.6%	25	0.3%	44	0.5%	10	0.1%	54	0.6%	9,276	100.0%
Stone County	26,981	98.1%	22	0.1%	183	0.7%	79	0.3%	241	0.9%	27,506	100.0%
Taney County	34,695	97.8%	42	0.1%	197	0.6%	167	0.5%	389	1.1%	35,490	100.0%
Texas County	22,098	98.3%	37	0.2%	82	0.4%	91	0.4%	162	0.7%	22,470	100.0%
Vernon County	19,075	97.9%	65	0.3%	103	0.5%	97	0.5%	148	0.8%	19,488	100.0%
Webster County	29,240	97.5%	241	0.8%	165	0.6%	74	0.2%	257	0.9%	29,977	100.0%
Wright County	19,613	98.4%	71	0.4%	116	0.6%	22	0.1%	112	0.6%	19,934	100.0%
Region Totals	921,896	95.8%	13,691	1.4%	7,441	0.8%	7,758	0.8%	11,951	1.2%	962,737	100.0%

Source: U.S. Census Bureau

HIV Disease Epi Profile Summary: Southwest HIV Region

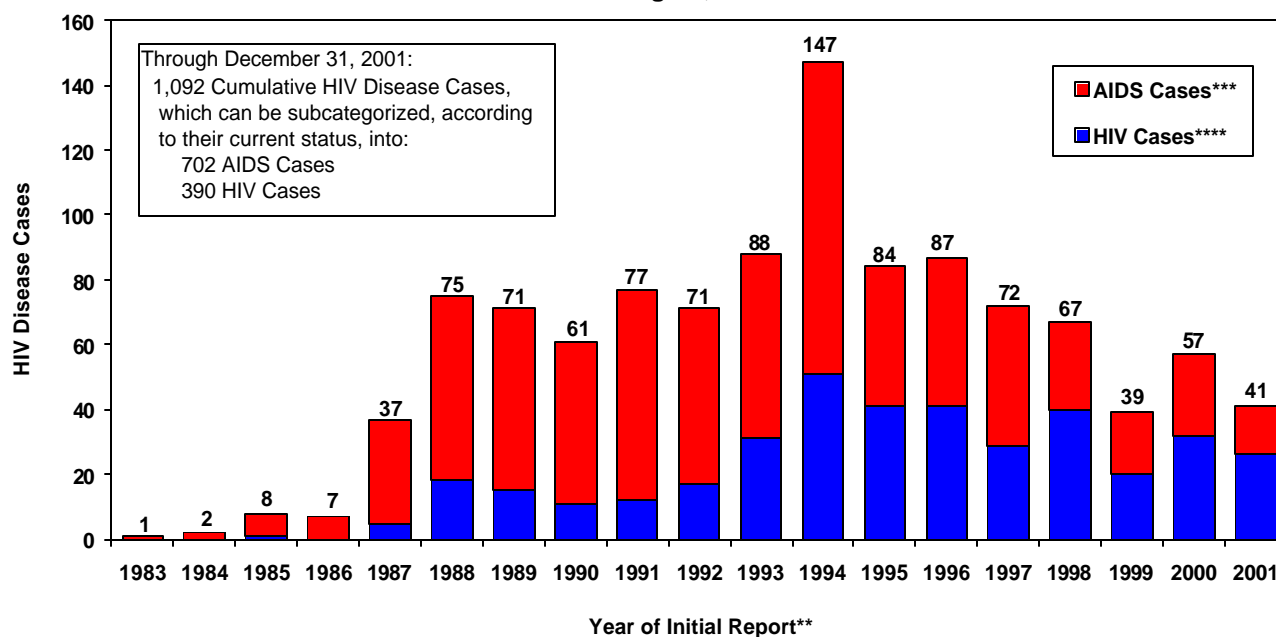
Magnitude and Impact of the Problem

- From 1983 through 2001, a total of 1,092 HIV Disease cases have been reported in residents in the Southwest HIV Region. In 2001, 41 new HIV Disease cases were reported for the first time to public health officials. Figure 1 shows reported HIV Disease cases by current status (HIV case vs. AIDS case) and year of initial report (i.e., the year in which the first report of the person, whether as an HIV case or an AIDS case, was received). (See also the section entitled "**Trends**" on page 211.)
- Of these 1,092 HIV Disease cases, 702 (64.3%) have met the case definition for AIDS and are thus categorized as AIDS cases; 392 (55.8%) of the 702 reported AIDS cases are known to have died, and 310 (44.2%) are living. In 2001, 25 AIDS cases were reported. Figure 2 (on page 208) shows persons (living and deceased) diagnosed with AIDS by year of report (see also the section entitled "**Trends**" on page 211).
- Of the 1,092 reported HIV Disease cases, 390 (35.7%) have not met the case definition for AIDS, and are thus categorized as HIV cases; 26 HIV cases* were reported in 2001.

* When reference is made to HIV cases reported in 2001, this means HIV cases reported during that year which remained HIV cases at the end of the year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included (instead, they are included among the AIDS cases reported in 2001).



Figure 1. Reported HIV Disease Cases by Current Status* and Year of Initial Report**
Southwest HIV Region, 1983-2001



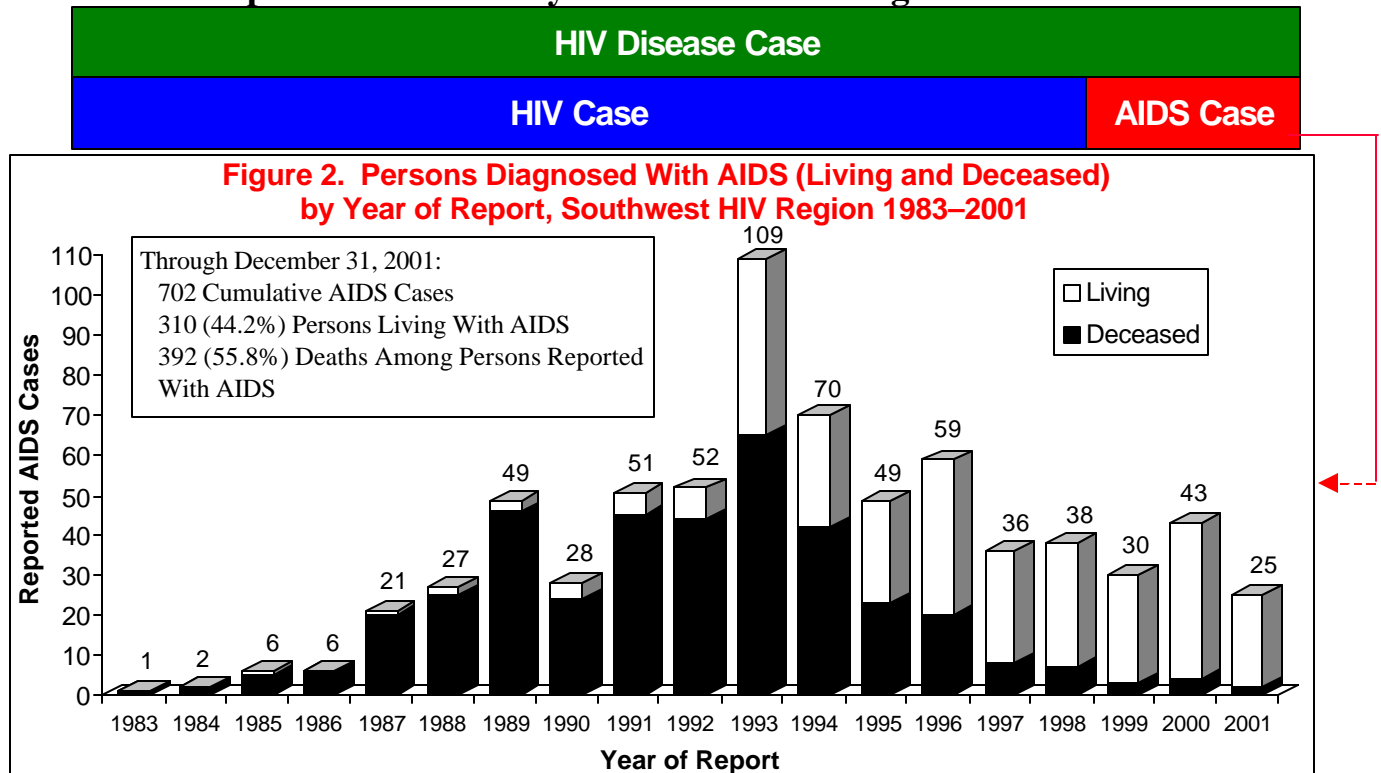
*HIV Cases vs. AIDS Cases

**Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)

***These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition; or 2) initially reported as an AIDS case.

****These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

HIV Disease Epi Profile Summary: Southwest HIV Region



Who

- Table 1 describes HIV cases, AIDS cases, and HIV Disease cases by gender, race/ethnicity, and age at diagnosis.
- Males comprise 73.8% of the 390 cumulative reported HIV cases and 89.9% of the 702 cumulative reported AIDS cases.
- Blacks* are disproportionately represented among reported HIV Disease cases. Although blacks make up only about 1.5% of the Southwest HIV Region's population, they have accounted for 10.0% of reported HIV cases and 4.7% of reported AIDS cases. The rate for HIV cases reported in 2001 in blacks (7.3) was 3.0 times the rate in whites* (2.4).
- The over-representation of blacks is somewhat more apparent in reported HIV and AIDS cases in females. Of the 102 reported female HIV cases, 16 (15.7%) were in black females. Of the 71 reported female AIDS cases, 5 (7.0%) were in black females.
- For Hispanics, the numbers of reported HIV and AIDS cases have been small (10 cumulative HIV cases with 2 cases reported in 2001; 9 cumulative AIDS cases with 1 case reported in 2001).
- The numbers of total reported HIV and AIDS cases in Asians and in American Indians have been very small (no HIV cases and 2 AIDS cases in Asians; 2 HIV cases and 3 AIDS cases in American Indians).
- Of the 390 cumulative reported HIV cases, 37.9% were diagnosed in 20-29 year olds, 36.4% in 30-39 year olds, 14.6% in 40-49 year olds, 4.9% in 13-19 year olds, 2.6% in persons less than 13 years old, and 3.6% in persons 50 years of age and older.
- Of the 380 reported adult/adolescent HIV cases: 177 (46.6%) were in men who have sex with men (MSM); 29 (7.6%) in men who have sex with men and inject drugs (MSM/IDUs); 51 (13.4%) in injecting drug users (IDUs); 82 (21.6%) in heterosexual contacts; and 31 (8.2%) are still being investigated and have not yet been placed in a specific exposure category.
- Of the 692 reported adult/adolescent AIDS cases: 420 (60.7%) were in MSM; 72 (10.4%) in MSM/IDUs; 74 (10.7%) in IDUs; 74 (10.7%) in heterosexual contacts; and 20 (2.9%) are still being investigated and have not yet been placed in a specific exposure category.
- Table 2 shows HIV and AIDS cases by adjusted exposure category. In this table, those cases currently classified as "Other/Unknown Adult", many of which are still under investigation, have been assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, heterosexual contact) in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of these cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation.
- A total of 10 perinatal HIV cases and 10 perinatal AIDS cases have been reported; 1 perinatal HIV case and no perinatal AIDS cases were reported in 2001. (Perinatal cases are the result of HIV transmission from an infected mother to her infant before or at the time of birth, or through breastfeeding.)

*Throughout this document, whenever HIV disease is being discussed, the term "white" indicates a non-Hispanic white person, and "black" indicates a non-Hispanic black individual. All persons whose ethnicity is reported as Hispanic, regardless of race (e.g., white or black), are characterized as "Hispanic".

HIV Disease Epi Profile Summary: Southwest HIV Region

HIV Disease Case

HIV Case

AIDS Case

Table 1. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Age at Diagnosis, Southwest HIV Region, 1983–2001

	HIV Cases				AIDS Cases				HIV Disease	
	Reported 2001*	%	Cumulative	%	Reported 2001	%	Cumulative	%	Cumulative	%
Gender										
Male	18	(69.2%)	288	(73.8%)	23	(92.0%)	631	(89.9%)	919	(84.2%)
Female	8	(30.8%)	102	(26.2%)	2	(18.0%)	71	(10.2%)	173	(15.8%)
Race/Ethnicity										
White	22	(84.6%)	334	(85.6%)	20	(80.0%)	655	(93.3%)	989	(90.6%)
Black	1	(3.8%)	39	(10.0%)	4	(16.0%)	33	(4.7%)	72	(6.6%)
Hispanic	2	(7.7%)	10	(2.6%)	1	(4.0%)	9	(1.3%)	19	(1.7%)
Asian/Pacific Islander	0	(0.0%)	0	(0.0%)	0	(0.0%)	2	(0.3%)	2	(0.2%)
American Indian	0	(0.0%)	2	(0.5%)	0	(0.0%)	3	(0.4%)	5	(0.5%)
Unknown	1	(3.8%)	5	(1.3%)	0	(0.0%)	0	(0.0%)	5	(0.5%)
Race/Ethnicity and Gender										
White Male	16	(61.5%)	253	(64.9%)	19	(76.0%)	593	(84.5%)	846	(77.5%)
Black Male	1	(3.8%)	23	(5.9%)	3	(12.0%)	28	(4.0%)	51	(4.7%)
Hispanic Male	0	(0.0%)	6	(1.5%)	1	(4.0%)	7	(1.0%)	13	(1.2%)
Asian/Pacific Islander Male	0	(0.0%)	0	(0.0%)	0	(0.0%)	1	(0.1%)	1	(0.1%)
American Indian Male	0	(0.0%)	2	(0.5%)	0	(0.0%)	2	(0.3%)	4	(0.4%)
Unknown Male	1	(3.8%)	4	(1.0%)	0	(0.0%)	0	(0.0%)	4	(0.4%)
White Female	6	(23.1%)	81	(20.8%)	1	(4.0%)	62	(8.8%)	143	(13.1%)
Black Female	0	(0.0%)	16	(4.1%)	1	(4.0%)	5	(0.7%)	21	(1.9%)
Hispanic Female	2	(7.7%)	4	(1.0%)	0	(0.0%)	2	(0.3%)	6	(0.5%)
Asian/Pacific Islander Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	1	(0.1%)	1	(0.1%)
American Indian Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	1	(0.1%)	1	(0.1%)
Unknown Female	0	(5.0%)	1	(0.3%)	0	(2.3%)	0	(0.0%)	1	(0.1%)
Age at Diagnosis[‡]										
<13	1	(3.8%)	10	(2.6%)	0	(0.0%)	7	(1.0%)		
13-19	1	(3.8%)	19	(4.9%)	0	(0.0%)	12	(1.7%)		
20-29	5	(19.2%)	148	(37.9%)	3	(12.0%)	142	(20.2%)		
30-39	9	(34.6%)	142	(36.4%)	12	(48.0%)	314	(44.7%)		
40-49	7	(26.9%)	57	(14.6%)	6	(24.0%)	170	(24.2%)		
50+	3	(11.5%)	14	(3.6%)	4	(16.0%)	57	(8.1%)		
Southwest HIV Region Total	26 (100.0%)		390 (100.0%)		25 (100.0%)		702 (100.0%)		1,092 (100.0%)	

* HIV Cases reported during 2001 which remained HIV cases at the end of that year.

† For HIV Cases, Age at Diagnosis is the age at which the individual was first diagnosed with HIV infection.

‡ For AIDS Cases, Age at Diagnosis is the age at which the individual was first diagnosed with AIDS.

Table 2. HIV and AIDS Cases by Adjusted Exposure Category*, Southwest Planning Region Reported 2001, and Cumulative Through December 2001

Exposure Category	HIV Cases				AIDS Cases			
	Reported 2001	%	Cumulative	%	Reported 2001	%	Cumulative	%
Adult/Adolescent								
Men Who Have Sex With Men	13	(52.0%)	190	(50.0%)	18	(72.0%)	432	(62.4%)
Men Who Have Sex With Men & Inject Drugs	0	(0.0%)	30	(7.9%)	1	(4.0%)	73	(10.5%)
Injecting Drug Use	3	(12.0%)	54	(14.2%)	2	(8.0%)	76	(11.0%)
Heterosexual Contact	7	(28.0%)	96	(25.3%)	4	(16.0%)	79	(11.4%)
Hemophilia/Coagulation Disorder	1	(4.0%)	6	(1.6%)	0	(0.0%)	22	(3.2%)
Blood Transfusion or Tissue Recipient	1	(4.0%)	4	(1.1%)	0	(0.0%)	10	(1.4%)
Risk Not Specified	--	--	--	--	--	--	--	--
Adult/Adolescent Subtotal	25 (100.0%)		380 (100.0%)		25 (100.0%)		692 (100.0%)	
Pediatric Subtotal	1		10		0		10	
Total	26		390		25		702	

* Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

HIV Disease Epi Profile Summary: Southwest HIV Region

Where

- Of the 390 cumulative HIV cases reported from the Southwest HIV Region, 156 (40.0%) were from Greene County, 56 (14.4%) from Jasper County, and 20 (5.1%) from Pulaski County. The remaining 122 (31.3%) of cases came from 23 other counties in the region; each of these counties had 1-19 cases. See Figure 9 in the “**Missouri**” section (page 25). Of the 39 cumulative HIV cases reported in blacks, the majority were from Greene County 15 cases, or (38.5%) and Pulaski County 13 cases, or (33.3%).
- Of the 702 cumulative AIDS cases reported from the Southwest HIV Region, 304 (43.3%) were from Greene County, 108 (15.4%) from Jasper County, 25 (3.6%) from Taney County, 24 (3.4%) from Christian and Pulaski Counties. The remaining 217 (30.9%) of cases came from 24 other counties in the region; each of these counties had 2-20 cases. See Figure 10 in the “**Missouri**” section (page 25). Of the 33 cumulative AIDS cases reported in blacks, 14 cases, or 42.4% were from Greene County and 8 cases, or 24.2% from Pulaski County.
- Tables 3 and 4 summarize cumulative reported HIV and AIDS cases by race/ethnicity and area.
- Table 8 in the “**Missouri**” section (page 24) compares the numbers and rates of HIV and AIDS cases reported from persons in the Southwest HIV Region with corresponding numbers and rates of HIV and AIDS cases reported from other areas in the state.
- Table 10 in the “**Missouri**” section (page 25) shows numbers and rates of HIV cases reported in 2001 by race/ethnicity for the Southwest HIV Region, and compares these figures with those for HIV cases reported from Missouri’s other HIV Regions.
- Figure 8 in the “**Missouri**” section (page 23) shows, for the counties within the region (as well as for the entire state), the numbers of living HIV Disease cases who have been reported to the Missouri Department of Health and Senior Services and who were residents of these counties when diagnosed.

**Table 3. Reported HIV Cases by Race/Ethnicity and Area
Southwest HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic	
	Cases	%	Cases	%	Cases	%
Greene County [†]	156	100.0%	134	85.9%	15	9.6%
Jasper County [†]	56	100.0%	47	83.9%	6	10.7%
Pulaski County [†]	20	100.0%	7	35.0%	13	65.0%
Christian County [†]	17	100.0%	17	100.0%	0	0.0%
Taney County [†]	19	100.0%	18	94.7%	0	0.0%
Remainder of Region [†]	122	100.0%	111	91.0%	5	4.1%
Southwest HIV Region [†]	390	100.0%	334	85.6%	39	10.0%

[†] Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

**Table 4. Reported AIDS Cases by Race/Ethnicity and Area
Southwest HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic	
	Cases	%	Cases	%	Cases	%
Greene County [†]	304	100.0%	285	93.8%	14	4.6%
Jasper County [†]	108	100.0%	99	91.7%	7	6.5%
Christian County [†]	24	100.0%	24	100.0%	0	0.0%
Taney County [†]	25	100.0%	24	96.0%	1	4.0%
Pulaski County [†]	24	100.0%	14	58.3%	8	33.3%
Remainder of Region [†]	217	100.0%	209	96.3%	3	1.4%
Southwest HIV Region [†]	702	100.0%	655	93.3%	33	4.7%

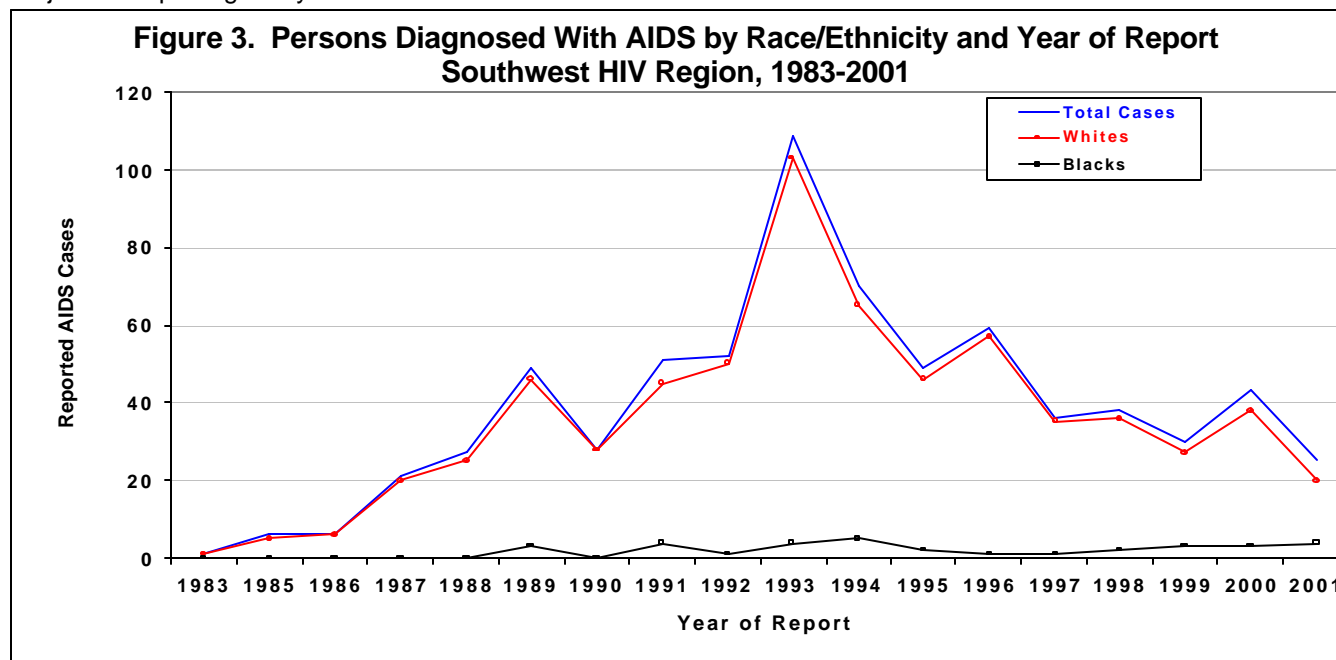
[†] Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

HIV Disease Epi Profile Summary: Southwest HIV Region

Trends

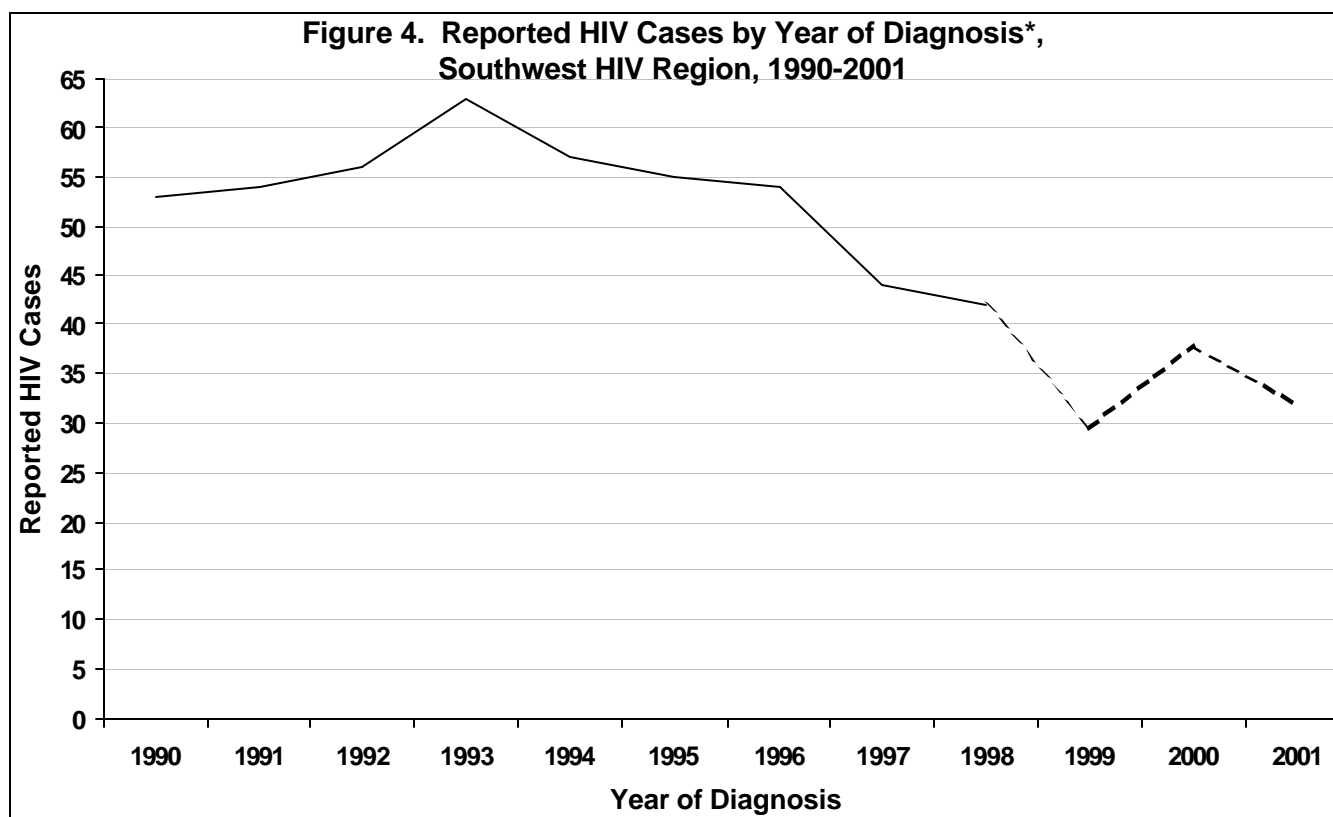
- The 41 HIV Disease cases initially reported in Southwest HIV Region residents in 2001 represented a 28.1% decrease from the 57 cases reported in 2000 (see Figure 1 on page 207).
- The 25 AIDS cases reported in 2001 represented a 41.9% decrease from the 43 cases reported in 2000 (see Figure 2 on page 208).
- From 2000 to 2001, the number of reported AIDS cases in whites decreased by 45.9% (from 37 cases reported in 2000 to 20 cases in 2001), while the small number of reported cases in blacks increased 25.0% (3 cases reported 2000 and 4 cases in 2001). See Figure 3.
- Comparing reported HIV cases (which generally represent persons more recently infected with HIV) with reported AIDS cases (which generally represent persons less recently infected) is a potential means of discerning which groups are increasingly becoming involved in the epidemic.
 - As indicated in Table 1 (page 209), a higher proportion of cumulative HIV cases, compared to cumulative AIDS cases, are female, providing evidence that among more recently infected persons a larger proportion may be female.
 - In Table 2 (page 209), cases currently placed in the “Other/Unknown” exposure category have been reassigned to a specific exposure category (such as MSM or heterosexual contact) based on past experience in reassigning such cases following investigation. As a result, HIV and AIDS cases can be better compared with regard to involvement in the epidemic by persons in different exposure categories. The data contained in Table 2 indicate that a lower proportion of cumulative HIV cases, compared to cumulative AIDS cases, are MSM, and a higher proportion are heterosexual contacts. This provides some evidence that among more recently infected persons, a smaller proportion are MSM and a larger proportion are heterosexual contacts. (However, the largest number of new infections likely continue to result from male homosexual contact).
- Figure 4 shows reported HIV cases[¶] by year of diagnosis^{¶¶} for the period from 1990-2001. The annual number of diagnosed cases has generally decreased since 1993.
- Figures 5-7 show reported HIV cases[¶] by year of diagnosis^{¶¶} according to gender, race/ethnicity, and exposure category. Care should be exercised in interpreting these graphs (and the similar graphs which follow) given the relatively small numbers of cases, and the fact that the numbers for more recent years are estimates that attempt to adjust for reporting delays.



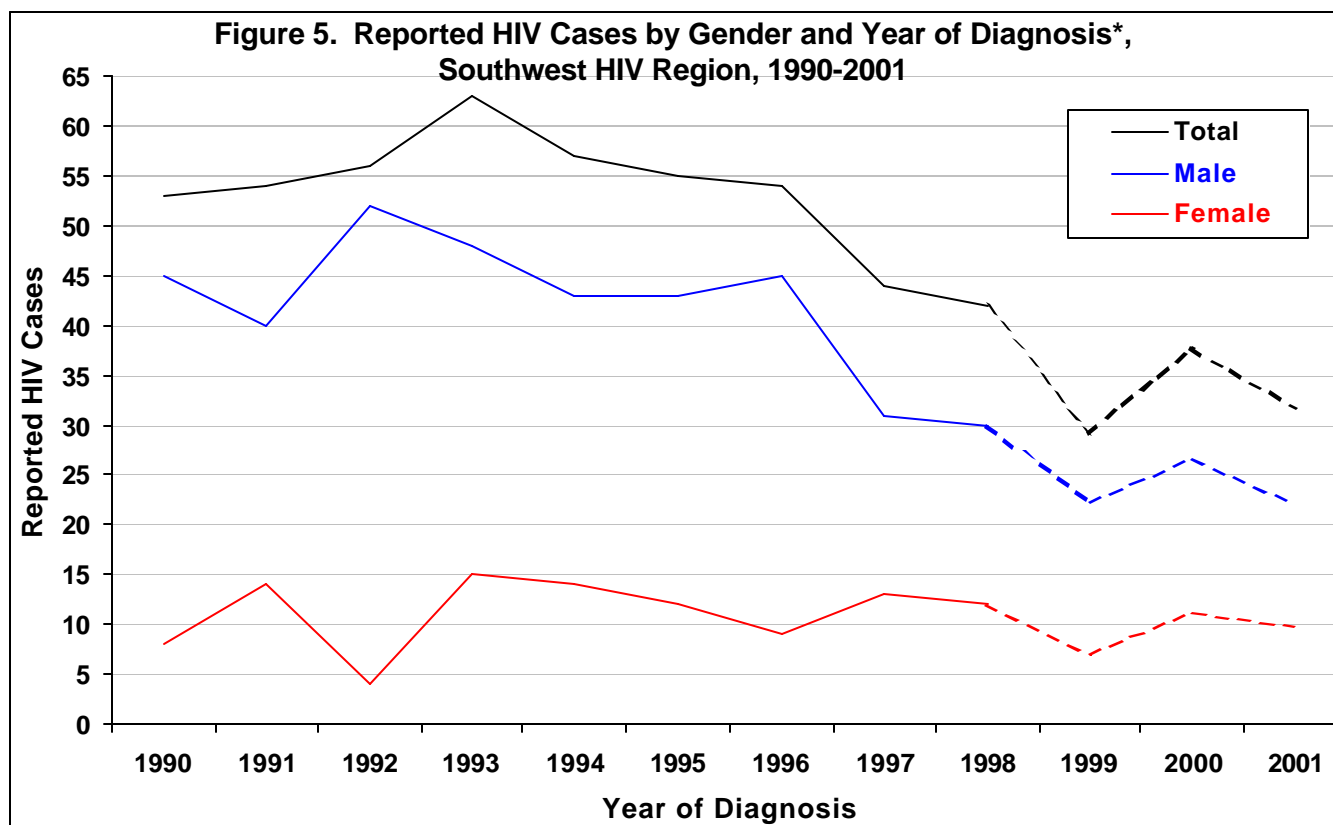
[¶] The HIV cases shown in Figures 4-7 represent individuals who were HIV cases (i.e., HIV infected but not AIDS) at the time of initial diagnosis of HIV infection. Some of these individuals have subsequently progressed to AIDS, while the rest currently remain HIV cases. However, in these figures, where the emphasis is on status at the time of initial diagnosis, all are considered HIV cases. (This is in contrast to the way data is presented in Table 1 and similar tables. In these tables, once an individual who is an HIV case meets the case definition for AIDS, he or she is no longer counted as an HIV case, and instead is counted as an AIDS case.)

^{¶¶} Adjustments were made for delays in reporting of cases. That is, for more recent years, not all cases diagnosed during these years have been reported as yet. To adjust for this, estimates were made, based on past experience, of the additional number of cases expected to ultimately be reported, and these expected cases were added to those already reported to give the estimated total number of cases for a given year as shown in the figure.

HIV Disease Epi Profile Summary: Southwest HIV Region

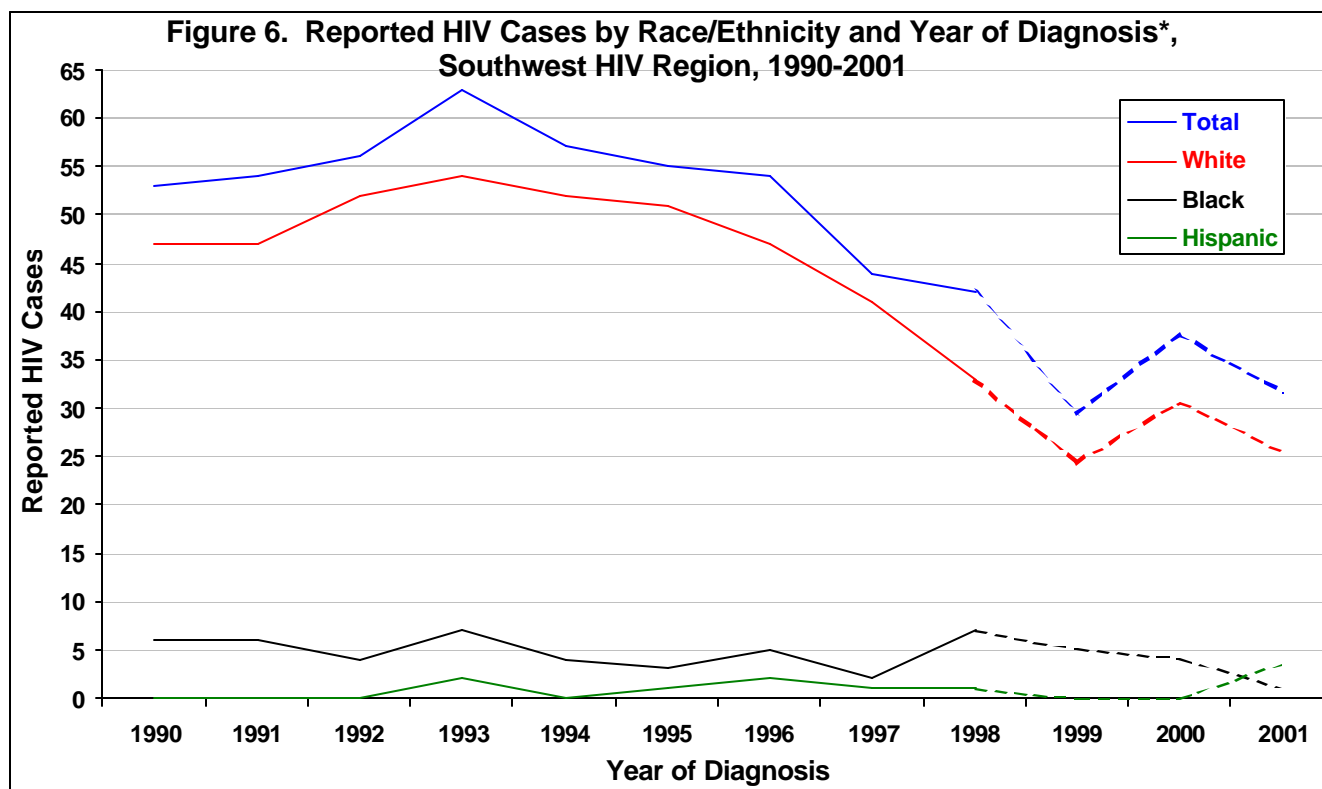


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

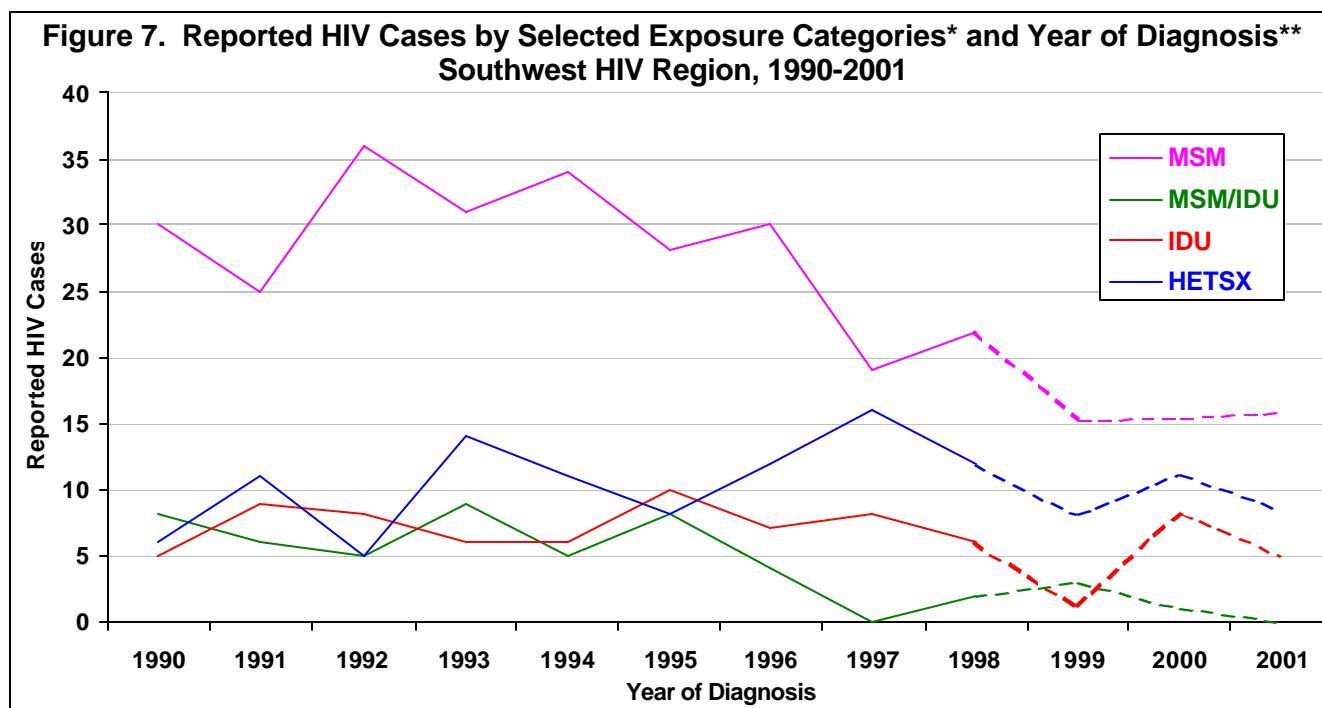


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Southwest HIV Region



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*MSM = men who have sex with men; MSM/IDU = men who have sex with men and inject drugs; IDU = injecting drug user; HETSX = heterosexual contact. Cases currently classified as "Risk Not Specified" (RNS), many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in diagnosed HIV cases. The proportion assigned to a given exposure category is based on past experience with RNS cases whose exposure risk has been discovered following investigation. Such experience indicates that almost all RNS cases whose exposure risk is eventually determined will be placed in one of the four exposure categories shown in this figure.

**Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Southwest HIV Region

Men Who Have Sex With Men (MSM)

Magnitude of the Problem

- From 1983 through 2001, a total of 597 HIV Disease cases in men who have sex with men (MSM) have been reported in Southwest HIV Region residents (these cases make up 55.7% of all reported adult/adolescent HIV Disease cases in the region). Of these 597 HIV Disease cases, 420 (70.4%) are AIDS cases and 177 (29.6%) are HIV cases.
- The 420 AIDS cases make up 60.7% of all reported adult/adolescent AIDS cases in the region. In 2001, of the 25 adult/adolescent AIDS cases reported, 15 (60.0%) were in MSM.
- The 177 HIV cases make up 46.6% of all reported adult/adolescent HIV cases in the region. In 2001, of the 25 adult/adolescent HIV cases reported, 9 (36.0%) were in MSM.
- These numbers, however, do not completely indicate the full extent of MSM involvement since for 20 adult/adolescent AIDS cases, and 31 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 209). Here it is estimated that approximately 432 (62.4%) of the 692 total reported adult/adolescent AIDS cases, [and approximately 18 (72.0%) of the 25 adult/adolescent AIDS cases reported in 2001] were in MSM. Likewise, it is estimated that approximately 190 (50.0%) of the 380 total reported adult/adolescent HIV cases, [and approximately 13 (52.0%) of the 25 adult/adolescent HIV cases reported in 2001] were in MSM.

Who

- Table 5 shows reported HIV and AIDS cases in MSM by race/ethnicity.
- Of total reported HIV cases among MSM, white men comprise 93.2%, and black men 4.0%.
- White men comprise 95.5% of total reported AIDS cases among MSM, and black men make up 3.8%.
- Table 6 shows reported HIV cases in MSM by age group. Among white MSM, the largest proportion of reported HIV cases (40.0%) were in men 20-29 and 30-39 years of age at the time of initial diagnosis. Among black MSM, the largest proportion of cases (71.4%) were in men 20-29 years of age at the time of diagnosis.
- Information obtained through interviews with reported MSM HIV and AIDS cases indicates that at least 30% of these men (30% of white men and 48% of black men) have, in addition to having sex with other men, also had sex with females. (Note that these percentages may actually be higher because complete information may not have been obtained on all reported cases.)

Where

- Of the 177 total HIV cases reported in MSM, 81 (45.8%) were from Greene County, 24 (13.6%) from Jasper County, and 10 (5.6%) from Christian County. The remaining cases were from 17 other counties in the region (each of these counties reported 1-7 cases).
- Table 7 shows reported HIV cases in MSM by race/ethnicity and geographic area.

Trends

- As indicated in Table 2 (on page 209), a smaller proportion of cumulative HIV cases (50.0%), compared to cumulative AIDS cases (62.4%), appear to be MSM, providing evidence that among more recently infected persons a smaller proportion are MSM. (However, the largest number of new infections likely continue to result from male homosexual contact.)
- Figure 8 shows reported HIV cases[†] in MSM by race/ethnicity and year of diagnosis^{††} for the period from 1990-2001. The annual number of diagnosed cases generally decreased from 1992-1999, and then remained essentially unchanged during the past two years.

[†] The HIV cases shown in Figure 9 represent individuals who were HIV cases (i.e., HIV infected but not AIDS) at the time of initial diagnosis of HIV infection. Some of these individuals have subsequently progressed to AIDS, while the rest currently remain HIV cases. However, in these figures, where the emphasis is on status at the time of initial diagnosis, all are considered HIV cases. (This is in contrast to the way data is presented in Table 1 and similar tables. In these tables, once an individual who is an HIV case meets the case definition for AIDS, he or she is no longer counted as an HIV case, and instead is counted as an AIDS case.)

^{††} Adjustments were made for delays in reporting of cases. That is, for more recent years, not all cases diagnosed during these years have been reported as yet. To adjust for this, estimates were made, based on past experience, of the additional number of cases expected to ultimately be reported, and these expected cases were added to those already reported to give the estimated total number of cases for a given year as shown in the figure.

HIV Disease Epi Profile Summary: Southwest HIV Region

Table 5. Reported HIV and AIDS Cases in Men Who Have Sex With Men by Race/Ethnicity, Southwest HIV Region, Cumulative Through December 2001

Race/Ethnicity	HIV Cases Cumulative		AIDS Cases Cumulative	
	Case	%	Case	%
White	165	(93.2%)	401	(95.5%)
Black	7	(4.0%)	16	(3.8%)
Hispanic	2	(1.1%)	2	(0.5%)
Other/Unknown	3	(1.7%)	1	(0.2%)
Southwest HIV Region Total	177	(100.0%)	420	(100.0%)

Table 6. Reported HIV Cases in Men Who Have Sex With Men by Age Group, Southwest HIV Region, Cumulative Through December 2001

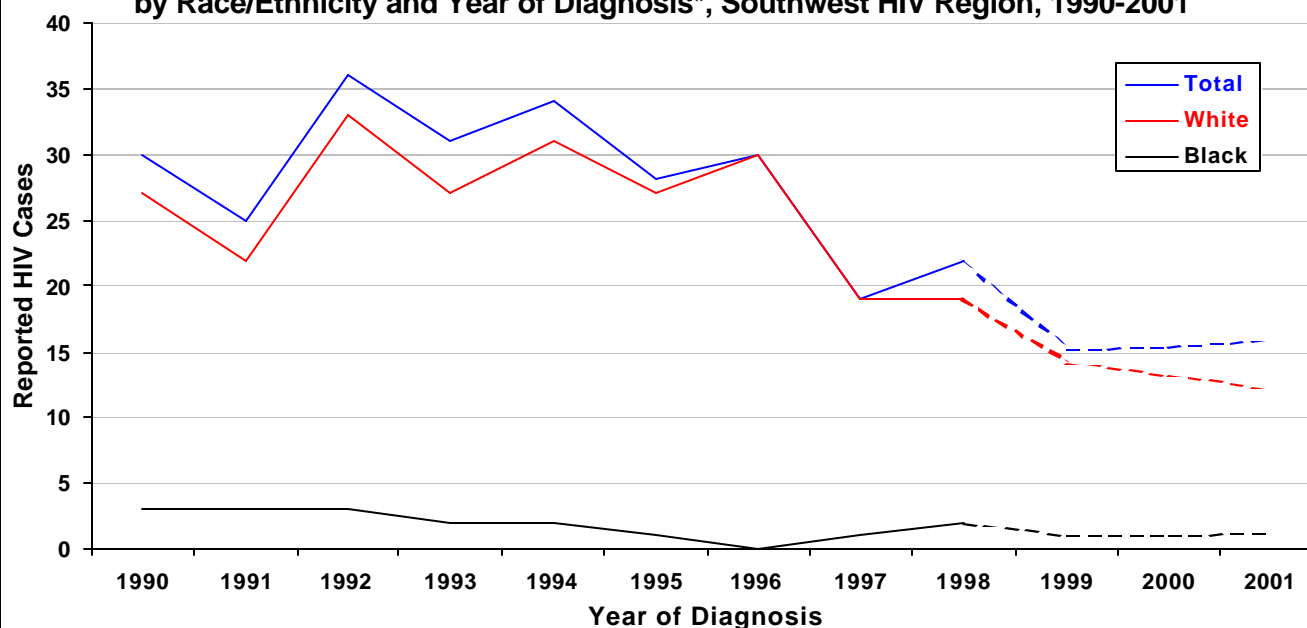
Age Group	Total	
	Cases	%
13-19	3	(1.7%)
20-29	73	(41.2%)
30-39	69	(39.0%)
40-49	26	(14.7%)
50+	6	(3.4%)
Southwest HIV Region Total	177	(100.0%)

Table 7. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Geographic Area, Southwest HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Total	
	Cases	%	Cases	%	Cases	%
Greene County	78	(96.3%)	2	(2.5%)	81	(100.0%)
Jasper County	23	(95.8%)	0	(0.0%)	24	(100.0%)
Christian County	10	(100.0%)	0	(0.0%)	10	(100.0%)
Remaining Counties	54	(87.1%)	5	(8.1%)	62	(100.0%)
Southwest HIV Region Total	165	(93.2%)	7	(4.0%)	177	(100.0%)

NOTE: Row percentages are shown.

Figure 8. Reported HIV Cases in Men Who Have Sex With Men by Race/Ethnicity and Year of Diagnosis*, Southwest HIV Region, 1990-2001



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Southwest HIV Region

Men Who Have Sex With Men and Inject Drugs (MSM/IDU)

Magnitude of the Problem

- From 1983 through 2001, a total of 101 HIV Disease cases in MSM/IDUs have been reported in Southwest HIV Region residents (these cases make up 9.4% of all reported adult/adolescent HIV Disease cases in the region). Of these 101 HIV Disease cases, 72 (71.2%) are AIDS cases and 29 (28.7%) are HIV cases.
- The 72 AIDS cases make up 10.4% of all reported adult/adolescent AIDS cases in the region.
- The 29 HIV cases make up 7.6% of total reported adult/adolescent HIV cases in the region.

Who

- Table 8 shows reported HIV and AIDS cases in MSM/IDUs by race/ethnicity.
- Of the 29 total reported HIV cases among MSM/IDUs, white men comprise 93.1%, and black men make up 6.9%.
- White men comprise 93.1% of the 72 total reported AIDS cases among MSM/IDUs, and black men make up 5.6%.
- Table 9 shows reported HIV cases in MSM/IDUs by age group. The largest proportion of reported HIV cases (48.3%) were in men 30-39 years of age at the time of initial diagnosis.
- Information obtained through interviews with reported MSM/IDU HIV and AIDS cases indicates that at least 40% of these men have, in addition to having sex with other men, also had sex with females. (Note that these percentages may actually be higher because complete information may not have been obtained on all reported cases.)

Where

- Of the 29 total HIV cases reported in MSM/IDUs, 12 (41.4%) were from Greene County, and 5 (17.2%) from Jasper County. The remaining 12 (41.4%) cases were from 9 other counties in the region (each of these counties reported 1-3 cases).
- Table 10 shows reported HIV cases in MSM/IDUs by geographic area.

Trends

- During each of the past 5 years, from 0-3 HIV cases have been diagnosed each year in MSM/IDUs.

HIV Disease Epi Profile Summary: Southwest HIV Region

Table 8. Reported HIV and AIDS Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity, Southwest HIV Region, Cumulative Through December 2001

Race/Ethnicity	HIV Cases Cumulative		AIDS Cases Cumulative	
	Case	%	Case	%
White	27	(93.1%)	67	(93.1%)
Black	2	(6.9%)	4	(5.6%)
Other/Unknown	0	(0.0%)	1	(1.4%)
Southwest HIV Region Total	29	(100.0%)	72	(100.0%)

Table 9. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Age Group, Southwest HIV Region, Cumulative Through December 2001

Age Group	Total	
	Cases	%
13-19	1	(3.4%)
20-29	9	(31.0%)
30-39	14	(48.3%)
40-49	4	(13.8%)
50+	1	(3.4%)
Southwest HIV Region Total	29	(100.0%)

Table 10. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Geographic Area, Southwest HIV Region, Cumulative Through December 2001

Geographic Area	Total	
	Cases	%
Greene County	12	(41.4%)
Jasper County	5	(17.2%)
Taney County	3	(10.3%)
Remaining Counties	9	(31.0%)
Southwest HIV Region Total	29	(100.0%)

HIV Disease Epi Profile Summary: Southwest HIV Region

Injecting Drug Users (IDUs)

Magnitude of the Problem

- From 1983 through 2001, a total of 125 HIV Disease cases in IDUs have been reported in Southwest HIV Region residents (these cases make up 11.7% of all reported adult/adolescent HIV Disease cases in the region). Of these 125 HIV Disease cases, 74 (59.2%) are AIDS cases and 51 (40.8%) are HIV cases.
- The 74 AIDS cases make up 10.7% of all reported adult/adolescent AIDS cases in the region.
- The 51 HIV cases make up 13.4% of total reported adult/adolescent HIV cases in the region.

Who

- Table 11 shows reported HIV and AIDS cases in IDUs by race/ethnicity and gender.
- White males comprise 43.1% of the 51 total reported HIV cases among IDUs; white females make up 41.2%; black males 2.0%, and black females 7.8%.
- White males comprise 64.9% of the 74 total reported AIDS cases among IDUs; white females make up 18.9%; black males 4.1%, and black females 2.7%.
- Two IDU HIV cases and 6 IDU AIDS cases have been reported in Hispanics. Most of these cases were in males.
- Table 12 shows reported HIV cases in IDUs by age group. The largest proportion of reported HIV cases (39.2%) were in persons 30-39 years of age at the time of initial diagnosis.

Where

- Of the 51 total HIV cases reported in IDUs, 21 (41.2%) were from Greene County and 7 (13.7%) from Jasper County. The remaining 23 cases were from 16 other counties in the region (each of these counties reported 1-3 cases).
- Table 13 shows reported HIV cases in IDUs by geographic area.

Trends

- During each of the past 6 years, from 1-8 HIV cases have been diagnosed each year in IDUs.

HIV Disease Epi Profile Summary: Southwest HIV Region

Table 11. Reported HIV and AIDS Cases in Injecting Drug Users by Race/Ethnicity and Gender, Southwest HIV Region, Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases Cumulative		AIDS Cases Cumulative	
	Case	%	Case	%
White Male	22	(43.1%)	48	(64.9%)
Black Male	1	(2.0%)	3	(4.1%)
White Female	21	(41.2%)	14	(18.9%)
Black Female	4	(7.8%)	2	(2.7%)
Southwest HIV Region Total	51	(100.0%)	74	(100.0%)

Table 12. Reported HIV Cases in Injecting Drug Users by Age Group Southwest HIV Region, Cumulative Through December 2001

Age Group	Total	
	Cases	%
13-19	5	(9.8%)
20-29	19	(37.3%)
30-39	20	(39.2%)
40-49	6	(11.8%)
50+	1	(2.0%)
Southwest HIV Region Total	51	(100.0%)

Table 13. Reported HIV Cases in Injecting Drug Users by Geographic Area, Southwest HIV Region, Cumulative Through December 2001

Geographic Area	Total	
	Cases	%
Greene County	21	(41.2%)
Jasper County	7	(13.7%)
Remaining Counties	23	(45.1%)
Southwest HIV Region Total	51	(100.0%)

Heterosexual Contacts

Magnitude of the Problem

- From 1983 through 2001, a total of 156 HIV Disease cases in heterosexual contacts have been reported in Southwest HIV Region residents (these cases make up 14.6% of all reported adult/adolescent HIV Disease cases in the region). Of these 156 HIV Disease cases 74 (47.4%) are AIDS cases and 82 (52.6%) are HIV cases.
- The 74 AIDS cases make up 10.7% of all reported adult/adolescent AIDS cases in the region. In 2001, of the 25 adult/adolescent AIDS cases reported, 3 (12.0%) were in heterosexual contacts.
- The 82 HIV cases make up 21.6% of total reported adult/adolescent HIV cases in the region. In 2001, of the 25 adult/adolescent HIV cases reported, none were initially indicated as being heterosexual contacts (but see the next bullet point).
- These numbers, however, do not indicate the full extent of heterosexual contact involvement since for 20 adult/adolescent AIDS cases, and 31 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the “Other/Unknown” exposure category. If these cases were all assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with “Other/Unknown” cases whose exposure category was determined following investigation, the result would be that seen in Table 2 on page 209. Here it is estimated that approximately 79 (11.4%) of the 692 total reported adult/adolescent AIDS cases, [and approximately 4 (16.0%) of the 25 adult/adolescent AIDS cases reported in 2001] were in heterosexual contacts. Likewise, it is estimated that approximately 96 (25.3%) of the 390 total reported adult/adolescent HIV cases, [and approximately 7 (28.0%) of the 25 adult/adolescent HIV cases reported in 2001] were in heterosexual contacts.

Who

- Table 14 shows reported HIV and AIDS cases in heterosexual contacts by race/ethnicity and gender.
- White females comprise 57.3% of the 82 total reported HIV cases among heterosexual contacts; white males make up 15.9%; black females 12.2%; and black males 9.8%.
- White females comprise 59.5% of the 74 total reported AIDS cases among heterosexual contacts; white males make up 32.4%; black females 4.1%; and black males 2.7%.
- Table 15 shows reported HIV cases in heterosexual contacts by age group. The largest proportion of reported HIV cases (41.5%) were in persons 20-29 years of age at the time of initial diagnosis.

Where

- Of the 82 total HIV cases reported in heterosexual contacts, 23 (28.0%) were from Greene County, 16 (19.5%) from Jasper County, and 7 (8.5%) from Pulaski County. Thirty-six cases were reported from 14 other counties in the region (each of these counties reported 1-6 cases).
- Table 16 shows reported HIV cases in heterosexual contacts by race/ethnicity and geographic area.

Trends

- As indicated in Table 2 (on page 209), a higher proportion of cumulative HIV cases (25.3%), compared to cumulative AIDS cases (11.4%), appear to be heterosexual contacts, providing evidence that among more recently infected persons a larger proportion may be heterosexual contacts.
- During each of the past 9 years, from 8-16 HIV cases have been diagnosed each year in heterosexual contacts. Figure 9 shows reported HIV cases in heterosexual contacts by race/ethnicity and year of diagnosis.

HIV Disease Epi Profile Summary: Southwest HIV Region

Table 14. Reported HIV and AIDS Cases in Heterosexual Contacts by Race/Ethnicity and Gender, Southwest HIV Region, Cumulative Through December 2001

Race/Ethnicity and Gender	HIV Cases Cumulative		AIDS Cases Cumulative	
	Case	%	Case	%
White Male	13	(15.9%)	24	(32.4%)
Black Male	8	(9.8%)	2	(2.7%)
White Female	47	(57.3%)	44	(59.5%)
Black Female	10	(12.2%)	3	(4.1%)
Southwest HIV Region Total	82	(100.0%)	74	(100.0%)

Table 15. Reported HIV Cases in Heterosexual Contacts by Age Group, Southwest HIV Region, Cumulative Through December 2001

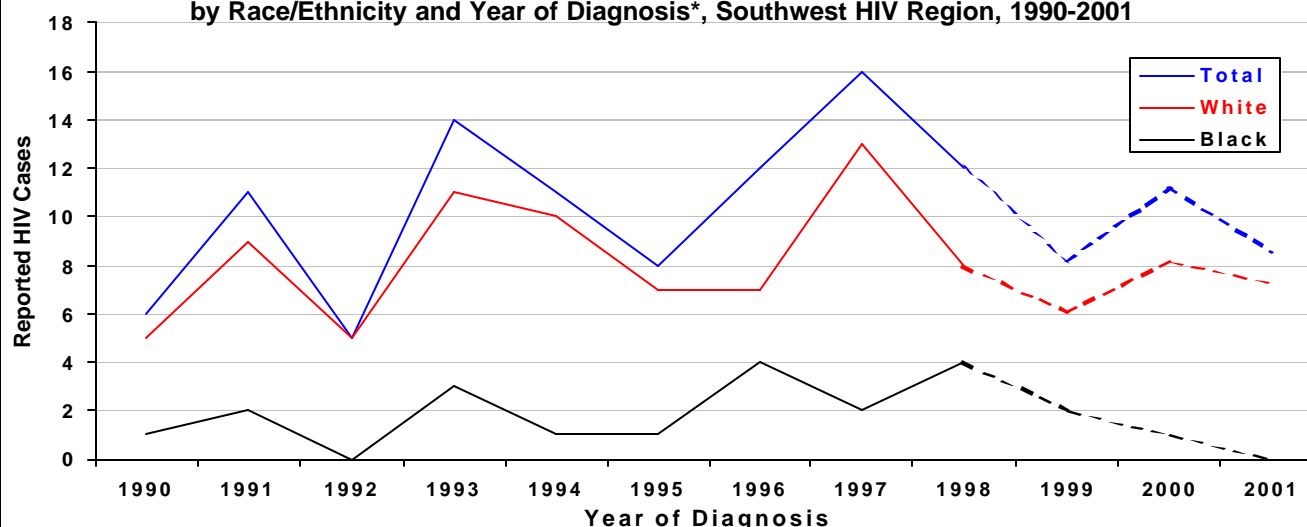
Age Group	Total	
	Cases	%
13-19	6	(7.3%)
20-29	34	(41.5%)
30-39	30	(36.6%)
40+	12	(14.6%)
Southwest HIV Region Total	82	(100.0%)

Table 16. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Geographic Area, Southwest HIV Region, Cumulative Through December 2001

Geographic Area	White		Black		Total	
	Cases	%	Cases	%	Cases	%
Greene County	14	(60.9%)	7	(30.4%)	23	(100.0%)
Jasper County	12	(75.0%)	3	(18.8%)	16	(100.0%)
Pulaski County	3	(42.9%)	4	(57.1%)	7	(100.0%)
Remaining Counties	31	(86.1%)	4	(11.1%)	36	(100.0%)
Southwest HIV Region Total	60	(73.2%)	18	(22.0%)	82	(100.0%)

NOTE: Row percentages are shown.

Figure 9. Reported HIV Cases in Heterosexual Contacts by Race/Ethnicity and Year of Diagnosis*, Southwest HIV Region, 1990-2001



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

STD Epi Profile Summary: Southwest HIV Region

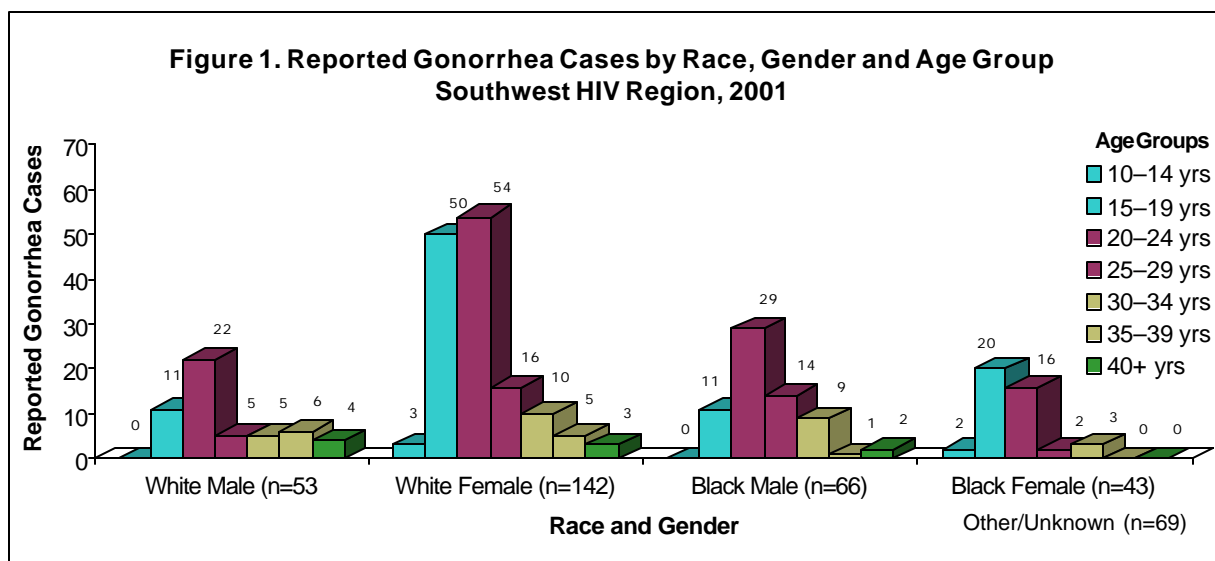
Gonorrhea

Magnitude of the Problem

- During 2001, 373 cases of gonorrhea were reported in the Southwest HIV Region; the corresponding rate* was 38.7 cases per 100,000 population.

Who

- Of the 373 gonorrhea cases reported in 2001, 146 (39.1%) were in males and 227 (60.9%) were in females. Among whites, a higher proportion of cases were reported in females (72.8%) than in males (27.2%). Among blacks, a higher proportion of cases were reported in males (60.6%) than in females (39.4%).
- Of the 373 gonorrhea cases reported in 2001, 195 (52.3%) were in whites and 109 (29.2%) were in blacks. Ten (2.7%) cases were in other racial groups, and for 59 (15.8%) cases, race was unknown.
- The rate* of reported cases in blacks (796.1) was about 38 times the rate* in whites (21.2).
- Table 1 on page 223 shows the numbers and rates of reported gonorrhea cases by race.
- Of the 373 gonorrhea cases reported in 2001, 123 (33.0%) were in teenagers. Teenagers made up 22 (51.2%) of the 43 black female cases, 53 (37.3%) of the 142 white female cases, 11 (16.7%) of the 66 black male cases, and 11 (20.8%) of the 53 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 373 gonorrhea cases reported, 179 (49.0%) were from Greene County, 71 (19.0%) from Jasper County, and 41 (11.0%) from Pulaski County. The remaining counties in the region each had from 0-13 cases reported. Cases were reported from 22 (75.9%) of the region's 29 counties. Table 2 shows the number and percentage of cases reported from those counties having the largest numbers of cases. Figure 2 is a map showing cases by county.
- The highest rate* of reported gonorrhea cases in 2001 was in Pulaski County (107.2). Table 2 shows rates of reported cases for counties with the most cases. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported gonorrhea cases by race from 1992-2001. The 373 gonorrhea cases reported in 2001 represented a 4.1% decrease from the 389 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: Southwest HIV Region

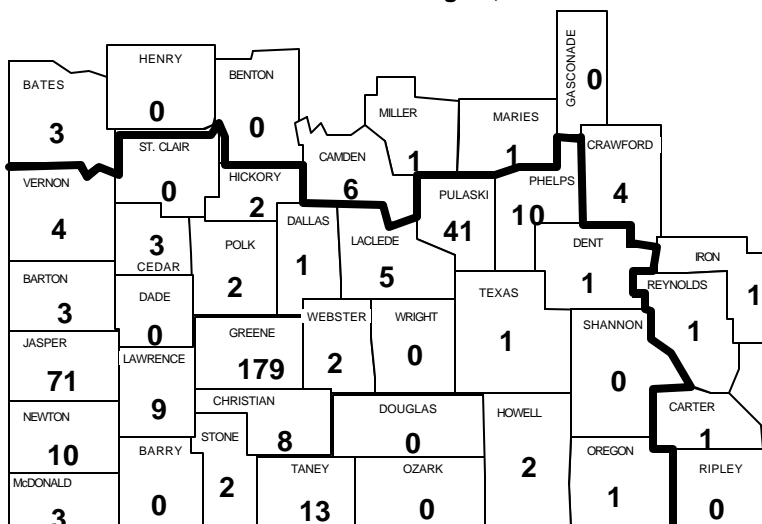
Table 1. Reported Gonorrhea Cases and Rates by Race, Southwest HIV Region, 2001

	Cases	%	Rate*
Whites	195	52.3%	21.2
Blacks	109	29.2%	796.1
Other/Unknown	69	18.5%	-
Total Cases	373	100.0%	38.7

Table 2. Reported Gonorrhea Cases and Rates by Selected Counties, Southwest HIV Region, 2001

	Cases	%	Rate*
Greene	179	48.0%	78.9
Jasper	71	19.0%	70.8
Pulaski	41	11.0%	107.2
Taney	13	3.5%	36.6
Newton	10	2.7%	20.1
Phelps	10	2.7%	25.7
Lawrence	9	2.4%	26.9
Christian	8	2.1%	15.7
Total Cases	373	100.0%	38.7

Figure 2. Reported Gonorrhea Cases by County Southwest HIV Region, 2001



*Per 100,000 population

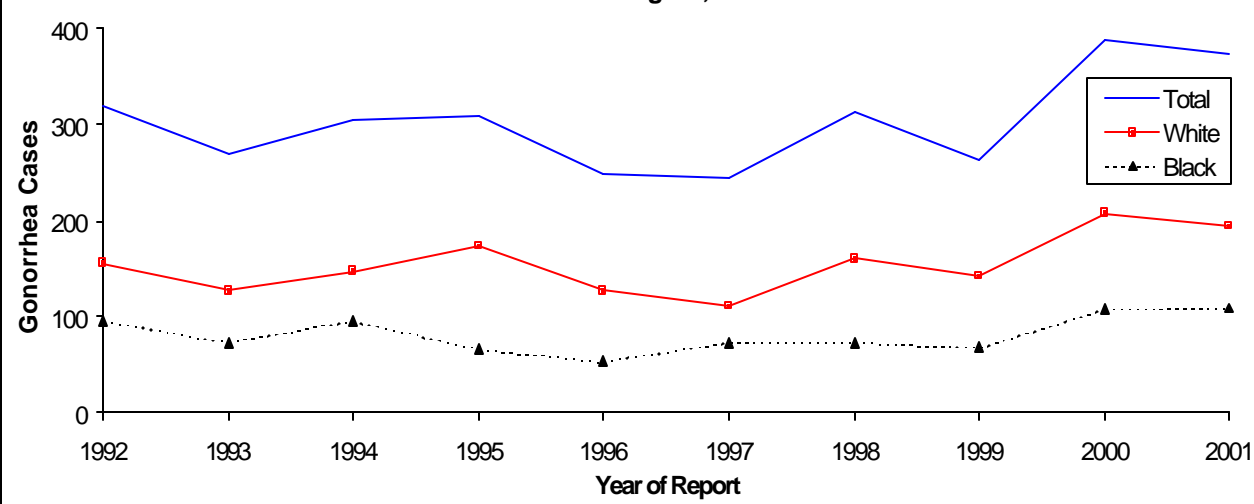
Table 3. Reported Gonorrhea Cases and Rates by Race and County, Southwest HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Greene County	179	100.0%	78.9	83	46.4%	38.5	64	35.8%	1317.7
Jasper County	71	100.0%	70.8	50	70.4%	52.5	14	19.7%	893.4
Pulaski County	41	100.0%	107.2	10	24.4%	34.8	22	53.7%	416.4
Taney County	13	100.0%	36.6	10	76.9%	28.8	0	0.0%	0.0
Newton County	10	100.0%	20.1	6	60.0%	12.6	4	40.0%	1487.0
Phelps County	10	100.0%	25.7	4	40.0%	10.9	3	30.0%	592.9
Lawrence County	9	100.0%	26.9	7	77.8%	21.4	1	11.1%	2272.7
Christian County	8	100.0%	15.6	7	87.5%	13.9	0	0.0%	0.0
Laclede County	5	100.0%	15.9	2	40.0%	16.3	0	0.0%	0.0
Southwest HIV Region	373	100.0%	38.7	195	52.3%	21.2	109	29.2%	796.1

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

Figure 3. Reported Gonorrhea Cases by Race and Year of Report Southwest HIV Region, 1992-2001



STD Epi Profile Summary: Southwest HIV Region

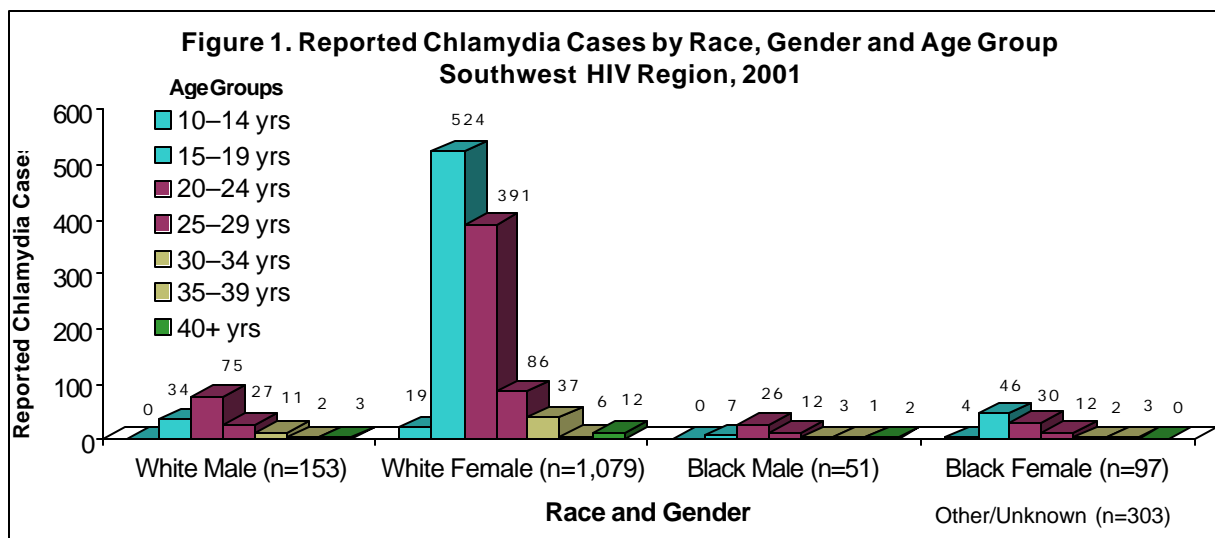
Chlamydia

Magnitude of the Problem

- During 2001, 1,683 cases of chlamydia were reported in the Southwest HIV Region; the corresponding rate* was 174.8 cases per 100,000 population.

Who

- Of the 1,683 chlamydia cases reported in 2001, 257 (15.3%) were in males and 1,426 (84.7%) were in females. Among whites, a higher proportion of cases were reported in females (87.6%) than in males (12.4%). Among blacks, a higher proportion of cases were also reported in females (65.6%) than in males (34.5%).
- Of the 1,683 chlamydia cases reported in 2001, 1,232 (73.2%) were in whites and 148 (8.8%) were in blacks. Forty (2.4%) cases were in other racial groups, and for 263 (15.6%) cases, race was unknown.
- The rate* of reported cases in blacks (1081.0) was about 8 times the rate* in whites (133.6).
- Table 1 on page 225 shows the numbers and rates of reported chlamydia cases by race.
- Of the 1,683 chlamydia cases reported in 2001, 767 (45.6%) were in teenagers. Teenagers made up 49 (50.5%) of the 97 black female cases, 542 (50.2%) of the 1,079 white female cases, 7 (13.7%) of the 51 black male cases, and 34 (22.2%) of the 153 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 1,683 chlamydia cases reported, 593 (35.2%) were from Greene County, 237 (14.1%) from Jasper County, and 162 (9.6%) from Pulaski County. The remaining counties in the region each had from 2-77 cases reported. Cases were reported from all 29 of the region's counties. Table 2 shows the number and percentage of cases reported from those counties having the largest numbers of cases. Figure 2 is a map showing cases by county.
- The highest rate* of reported chlamydia cases in 2001 was in Pulaski County (423.8). Table 2 shows rates of reported cases for counties with the most cases. Table 3 shows rates of reported cases by race and county.

Trends

- Figure 3 shows trends in reported chlamydia cases by race from 1992-2001. The 1,683 cases reported in 2001 represented a 9.1% increase from the 1,542 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: Southwest HIV Region

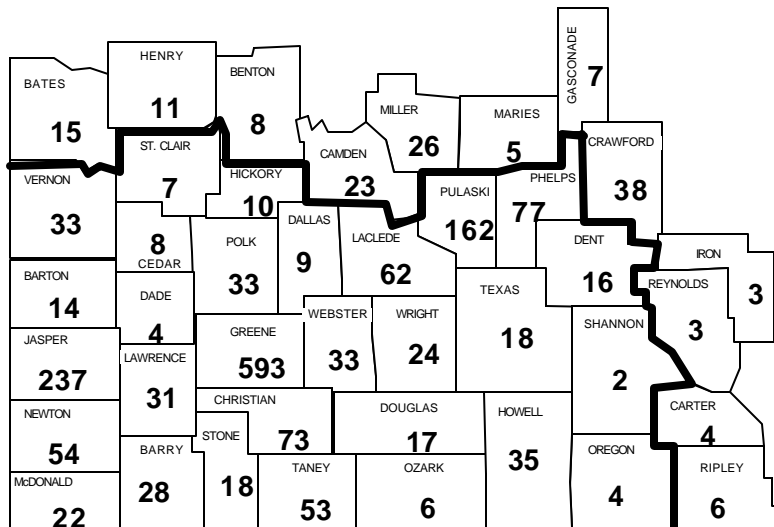
Table 1. Reported Chlamydia Cases and Rates by Race, Southwest HIV Region, 2001

	Cases	%	Rate*
Whites	1,232	73.2%	133.6
Blacks	148	8.8%	1081.0
Other/Unknown	303	18.0%	—
Total Cases	1,683	100.0%	174.8

Table 2. Reported Chlamydia Cases and Rates by Selected Counties, Southwest HIV Region, 2001

	Cases	%	Rate*
Greene	593	35.2%	261.2
Jasper	237	14.1%	236.4
Pulaski	162	9.6%	423.8
Phelps	77	4.6%	197.7
Christian	73	4.3%	142.2
Laclede	62	3.7%	197.3
Newton	54	3.2%	108.6
Taney	53	3.1%	149.3
Howell	35	2.1%	97.0
Total Cases	1,683	100.0%	174.8

Figure 2. Reported Chlamydia Cases by County Southwest HIV Region, 2001



*Per 100,000 population

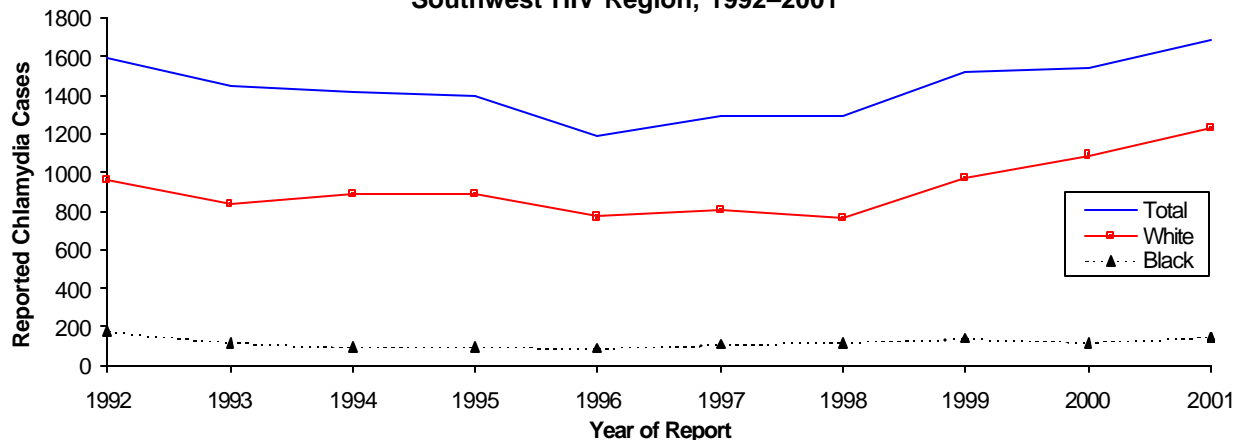
Table 3. Reported Chlamydia Cases and Rates by Race and County, Southwest HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Greene County	593	100.0%	261.2	441	74.4%	204.3	67	11.3%	1379.5
Jasper County	237	100.0%	236.4	210	88.6%	220.6	9	3.8%	574.3
Pulaski County	162	100.0%	423.8	69	42.6%	240.1	57	35.2%	1078.8
Phelps County	77	100.0%	197.7	51	66.2%	139.0	7	9.1%	1383.4
Christian County	73	100.0%	142.2	65	89.0%	129.2	0	0.0%	0.0
Laclede County	62	100.0%	197.3	36	58.1%	117.1	1	1.6%	675.7
Newton County	54	100.0%	108.6	47	87.0%	98.8	2	3.7%	743.5
Taney County	53	100.0%	149.3	36	67.9%	103.8	0	0.0%	0.0
Howell County	35	100.0%	97.0	19	54.3%	53.7	0	0.0%	0.0
Polk County	33	100.0%	128.2	29	87.9%	115.6	0	0.0%	0.0
Vernon County	33	100.0%	169.3	23	69.7%	120.6	0	0.0%	0.0
Webster County	33	100.0%	110.1	27	81.8%	92.3	1	3.0%	414.9
Southwest HIV Region	1,683	100.0%	174.8	1,232	73.2%	133.6	148	8.8%	1081.0

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

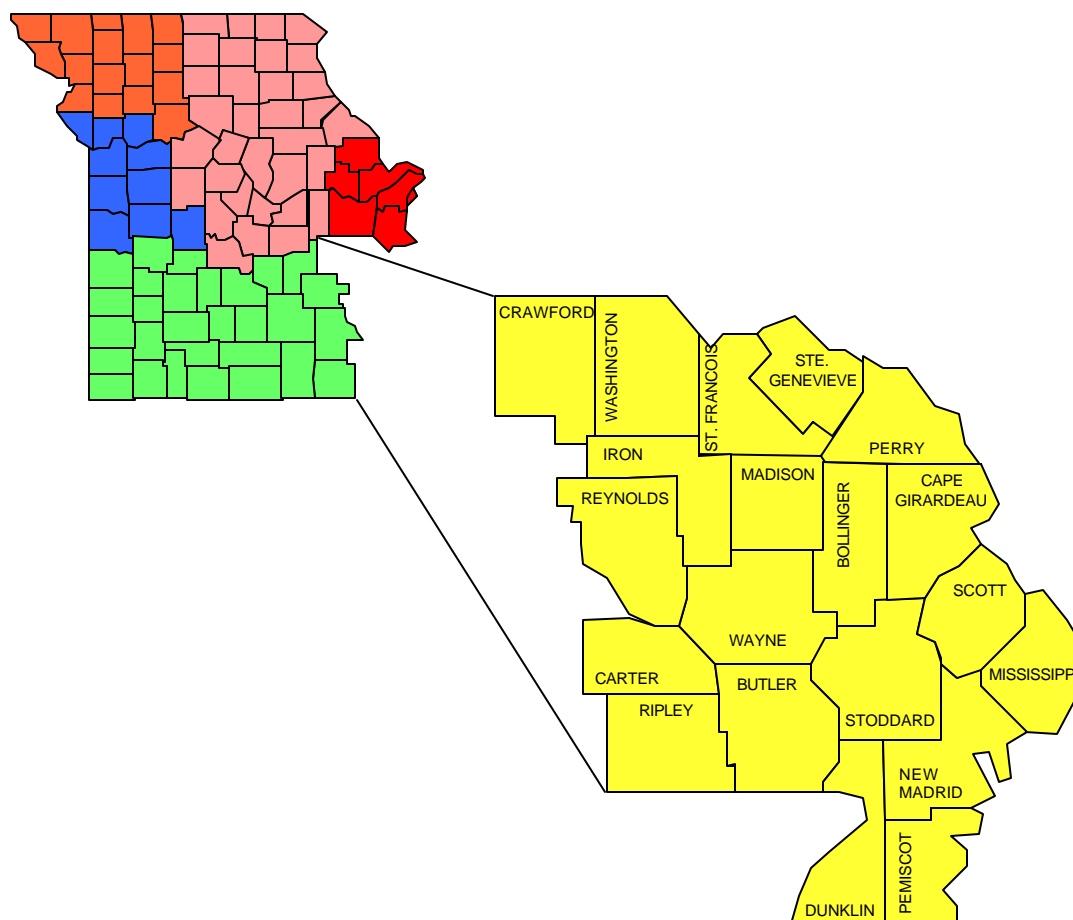
Figure 3. Reported Chlamydia Cases by Race and Year of Report Southwest HIV Region, 1992–2001



STD Epi Profile Summary: Southwest HIV Region

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Southeast HIV Region



1999 Population Estimates for the Southeast HIV Region

County	White		African American		American Indian		Asian/Pacific Is		Hispanic		Total	
Bollinger County	11,611	98.2%	24	0.2%	30	0.3%	45	98.2%	119	1.0%	11,829	100.0%
Butler County	37,270	92.3%	2,477	6.1%	130	0.3%	178	92.3%	324	0.8%	40,379	100.0%
Cape Girardeau County	62,070	92.4%	3,885	5.8%	91	0.1%	670	92.4%	484	0.7%	67,200	100.0%
Carter County	6,185	98.3%	2	0.0%	41	0.7%	8	98.3%	56	0.9%	6,292	100.0%
Crawford County	22,125	98.7%	23	0.1%	37	0.2%	42	98.7%	200	0.9%	22,427	100.0%
Dunklin County	29,026	89.2%	3,112	9.6%	80	0.2%	85	89.2%	223	0.7%	32,526	100.0%
Iron County	10,774	98.5%	68	0.6%	14	0.1%	19	98.5%	61	0.6%	10,936	100.0%
Madison County	11,458	98.4%	15	0.1%	35	0.3%	52	98.4%	90	0.8%	11,650	100.0%
Mississippi County	10,209	76.5%	3,040	22.8%	26	0.2%	17	76.5%	47	0.4%	13,339	100.0%
New Madrid County	16,055	80.5%	3,687	18.5%	24	0.1%	44	80.5%	123	0.6%	19,933	100.0%
Pemiscot County	14,678	69.4%	6,275	29.7%	31	0.1%	58	69.4%	108	0.5%	21,150	100.0%
Perry County	17,170	98.5%	22	0.1%	29	0.2%	104	98.5%	106	0.6%	17,431	100.0%
Reynolds County	6,559	99.0%	13	0.2%	12	0.2%	4	99.0%	39	0.6%	6,627	100.0%
Ripley County	13,930	98.3%	15	0.1%	53	0.4%	33	98.3%	143	1.0%	14,174	100.0%
Scott County	35,777	88.2%	4,313	10.6%	84	0.2%	90	88.2%	300	0.7%	40,564	100.0%
St. Francois County	53,674	96.2%	1,378	2.5%	123	0.2%	208	96.2%	407	0.7%	55,790	100.0%
Ste. Genevieve County	17,260	98.8%	57	0.3%	29	0.2%	39	98.8%	77	0.4%	17,462	100.0%
Stoddard County	28,810	97.2%	521	1.8%	60	0.2%	60	97.2%	182	0.6%	29,633	100.0%
Washington County	22,487	96.3%	662	2.8%	41	0.2%	25	96.3%	139	0.6%	23,354	100.0%
Wayne County	12,873	98.7%	33	0.3%	50	0.4%	14	98.7%	76	0.6%	13,046	100.0%
Region Totals	440,001	92.5%	29,622	6.2%	1,020	0.2%	1,795	92.5%	3,304	0.7%	475,742	100.0%

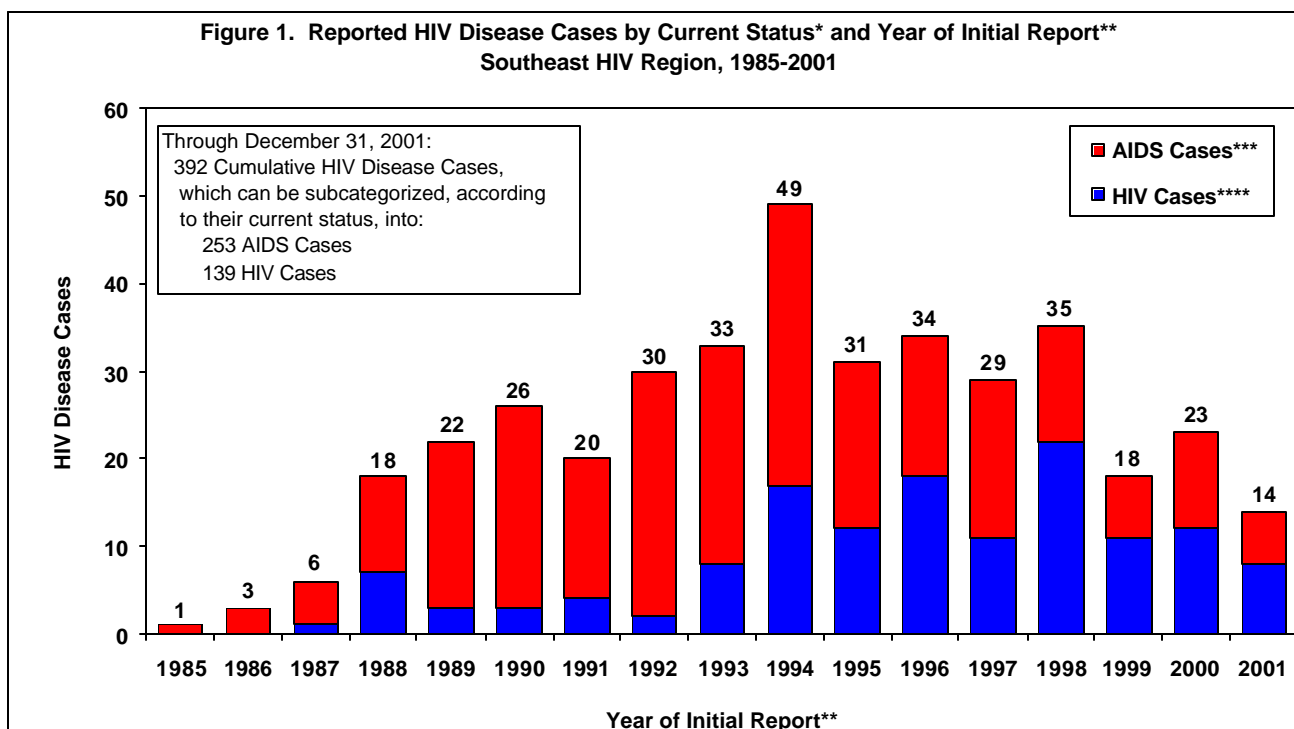
Source: U.S. Census Bureau

HIV Disease Epi Profile Summary: Southeast HIV Region

Magnitude and Impact of the Problem

- From 1985 through 2001, a total of 392 HIV Disease cases have been reported in residents in the Southeast HIV Region. In 2001, 14 new HIV Disease cases were reported for the first time to public health officials. Figure 1 shows reported HIV Disease cases by current status (HIV case vs. AIDS case) and year of initial report (i.e., the year in which the first report of the person, whether as an HIV case or an AIDS case, was received). (See also the section entitled “**Trends**” on page 231.)
- Of these 392 HIV Disease cases, 253 (64.5%) have met the case definition for AIDS and are thus categorized as AIDS cases; 143 (56.5%) of the 253 reported AIDS cases are known to have died, and 110 (43.5%) are living.
- In 2001, 9 AIDS cases were reported. Figure 2 (on page 228) shows persons (living and deceased) diagnosed with AIDS by year of report (see also the section entitled “**Trends**” on page 231).
- Of the 392 reported HIV Disease cases, 139 (35.5%) have not met the case definition for AIDS, and are thus categorized as HIV cases; 8 HIV cases* were reported in 2001.

* When reference is made to HIV cases reported in 2001, this means HIV cases reported during that year which remained HIV cases at the end of the year. Those HIV cases reported in 2001 which later in the year became AIDS cases are not included (instead, they are included among the AIDS cases reported in 2001).



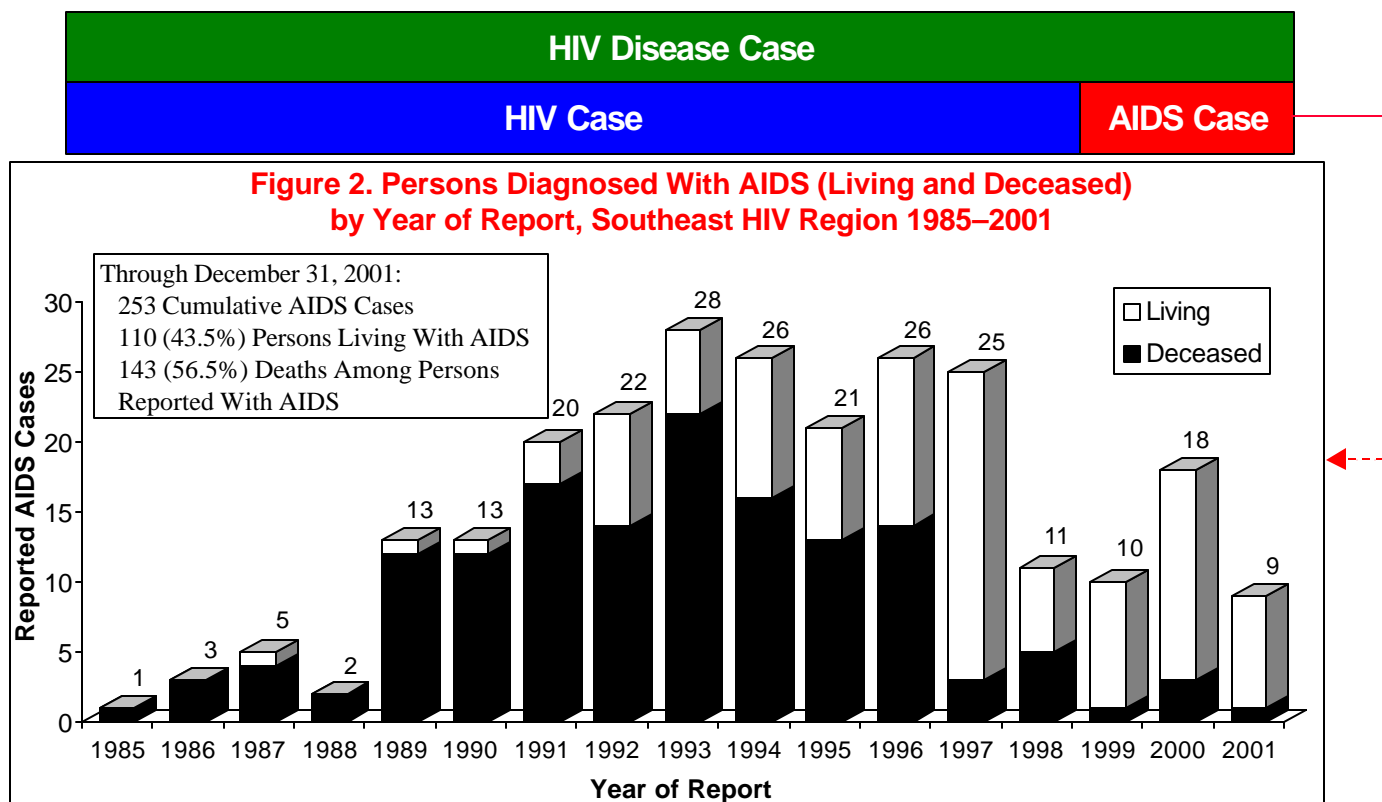
*HIV Cases vs. AIDS Cases

**Cases are indicated by year of their initial report to the Missouri Department of Health and Senior Services (i.e., by the year in which the first report of the person, whether as an HIV case or an AIDS case, was received by the department.)

***These cases were either: 1) initially reported as HIV cases and then later reclassified as AIDS cases because they had subsequently come to meet the AIDS case definition; or 2) initially reported as an AIDS case.

****These cases were initially reported as HIV cases, and have subsequently remained HIV cases (i.e., they have not met the case definition for AIDS).

HIV Disease Epi Profile Summary: Southeast HIV Region



Who

- Table 1 describes HIV cases, AIDS cases, and HIV Disease cases by gender, race/ethnicity, and age at diagnosis.
- Males comprised 74.8% of the 139 HIV cases and 79.4% of the 253 cumulative reported AIDS cases.
- Blacks* are disproportionately represented among reported HIV Disease cases. Although blacks make up only about 6% of the Southeast HIV Region's population, they have accounted for 27.3% of cumulative reported HIV cases and 17.8% of cumulative reported AIDS cases. The rate for HIV cases reported in 2001 in blacks (10.1) was 9.2 times the rate in whites* (1.1).
- The over-representation of blacks is especially seen in reported HIV and AIDS cases in females. Of the 35 reported female HIV cases, 18 (51.4%) were in black females. Of the 52 female cumulative reported AIDS cases, 25 (48.1%) were in black females.
- Of the 139 cumulative reported HIV cases, 38.1% were diagnosed in 20-29 year olds, 30.9% in 30-39 year olds, 13.7% in 40-49 year olds, 8.6% in 13-19 year olds, and 6.5% in persons 50 years of age and older.
- Of the 136 adult/adolescent cumulative reported HIV cases: 57 (41.9%) were in men who have sex with men (MSM); 11 (8.1%) in men who have sex with men and inject drugs (MSM/IDUs); 13 (9.6%) in injecting drug users (IDUs); 39 (28.7%) in heterosexual contacts; and 13 (9.6%) are still being investigated and have not yet been placed in a specific exposure category.
- Of the 248 adult/adolescent cumulative reported AIDS cases: 124 (49.8%) were in MSM; 16 (6.4%) in MSM/IDUs; 35 (14.1%) in IDUs; 47 (18.9%) in heterosexual contacts; and 9 (3.6%) are still being investigated and have not yet been placed in a specific exposure category.
- Table 2 shows HIV and AIDS cases by adjusted exposure category. In this table, those cases currently classified as "Other/Unknown Adult", many of which are still under investigation, have been assigned to a specific exposure category (i.e., MSM, MSM/IDU, IDU, heterosexual contact) in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of these cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation.
- A total of 3 perinatal HIV cases and 4 perinatal AIDS cases have been reported; No perinatal HIV or AIDS cases were reported in 2001. (Perinatal cases are the result of HIV transmission from an infected mother to her infant before or at the time of birth, or through breastfeeding.)

* Throughout this document, whenever HIV Disease is being discussed, term "white" indicates a non-Hispanic white person, and "black" indicates a non-Hispanic black individual. All persons whose ethnicity is reported as Hispanic, regardless of race (i.e., white or black), are characterized as "Hispanic".

HIV Disease Epi Profile Summary: Southeast HIV Region

HIV Disease Case

HIV Case

AIDS Case

Table 1. Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Age at Diagnosis, Southeast HIV Region, 1985–2001

	HIV Cases				AIDS Cases				HIV Disease	
	Reported 2001*	%	Cumulative Cases	%	Reported 2001	%	Cumulative Cases	%	Cumulative Cases	%
Gender										
Male	6	(75.0%)	104	(74.8%)	6	(66.7%)	201	(79.4%)	305	(77.8%)
Female	2	(25.0%)	35	(25.2%)	3	(33.3%)	52	(20.6%)	87	(22.2%)
Race/Ethnicity										
White	5	(62.5%)	99	(71.2%)	3	(33.3%)	206	(81.4%)	305	(77.8%)
Black	3	(37.5%)	38	(27.3%)	6	(66.7%)	45	(17.8%)	83	(21.2%)
Other/Unknown	0	(0.0%)	2	(1.4%)	0	(0.0%)	2	(0.8%)	4	(1.0%)
Race/Ethnicity and Gender										
White Male	5	(62.5%)	82	(59.0%)	3	(33.3%)	179	(70.8%)	261	(66.6%)
Black Male	1	(12.5%)	20	(14.4%)	3	(33.3%)	20	(7.9%)	40	(10.2%)
Other//Unknown Male	0	(0.0%)	2	(1.4%)	0	(0.0%)	2	(0.8%)	4	(1.0%)
White Female	0	(0.0%)	17	(12.2%)	0	(0.0%)	27	(10.7%)	44	(11.2%)
Black Female	2	(25.0%)	18	(12.9%)	3	(33.3%)	25	(9.9%)	43	(11.0%)
Other/Unknown Female	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Age at Diagnosis[‡]										
<13	0	(0.0%)	3	(2.2%)	0	(0.0%)	3	(1.2%)		
13-19	0	(0.0%)	12	(8.6%)	0	(0.0%)	6	(2.4%)		
20-29	3	(37.5%)	53	(38.1%)	2	(22.2%)	56	(22.1%)		
30-39	1	(12.5%)	43	(30.9%)	3	(33.3%)	110	(43.5%)		
40-49	2	(25.0%)	19	(13.7%)	3	(33.3%)	51	(20.2%)		
50+	2	(25.0%)	9	(6.5%)	1	(11.1%)	27	(10.7%)		
Southeast HIV Region Total	8	(100.0%)	139	(100.0%)	9	(100.0%)	253	(100.0%)	392	(100.0%)

*HIV Cases reported during 2001 which remained HIV cases at the end of that year.

[‡]For HIV Cases, Age at Diagnosis is the age at which the individual was first diagnosed with HIV infection.

For AIDS Cases, Age at Diagnosis is the age at which the individual was first diagnosed with AIDS.

Table 2. HIV and AIDS Cases by Adjusted Exposure Category*, Southeast HIV Region Cumulative Through December 2001

Exposure Category	HIV Cases		AIDS Cases	
	Cumulative Case	%	Cumulative Case	%
Adult/Adolescent				
Men Who Have Sex With Men	62	(45.6%)	130	(52.2%)
Men Who Have Sex With Men & Inject Drug	11	(8.1%)	16	(6.4%)
Injecting Drug Use	15	(11.0%)	36	(14.5%)
Heterosexual Contact	45	(33.1%)	49	(19.7%)
Hemophilia/Coagulation Disorder	3	(2.2%)	10	(4.0%)
Blood Transfusion or Tissue Recipient	0	(0.0%)	8	(3.2%)
Risk Not Specified	—	—	—	—
Adult/Adolescent Subtotal	136	(100.0%)	249	(100.0%)
Pediatric Subtotal	3		4	
Total	139		253	

* Cases currently classified as "Other/Unknown Adult," many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in reported HIV/AIDS cases. The proportion of Other/Unknown Adult cases assigned to a given exposure category is based on past experience with Other/Unknown Adult cases whose exposure risk has been determined following investigation. Such experience indicates that almost all Other/Unknown Adult cases whose exposure risk is eventually determined will be placed in one of four exposure categories: men who have sex with men, men who have sex with men and inject drugs, injecting drug use, or heterosexual contact.

HIV Disease Epi Profile Summary: Southeast HIV Region

Where

- Of the 139 cumulative HIV cases reported from the Southeast HIV Region, 26 (18.7%) were from Cape Girardeau County, 16 (11.5%) from Scott County, and 15 (10.8%) from St. Francois County. The remaining 57 (41.0%) of cases came from 15 other counties in the region; each of these counties had 1-14 reported cases. See Figure 9 in the “Missouri” section (page 25). Of the 38 cumulative HIV cases reported in blacks, the majority were from Cape Girardeau County (8 cases, or 21.1%) and Mississippi and Pemiscot Counties (6 cases, or 15.8%).
- Of the 253 cumulative AIDS cases reported from the Southeast HIV Region, 52 (20.6%) were from Cape Girardeau County, 42 (16.7%) from St. Francois County, 27 (10.7%) from Dunklin County, and 20 (7.9%) from Scott County. The remaining 112 (44.3%) cases came from 14 other counties in the region; each of these counties had 1-14 cases. See Figure 10 in the “Missouri” section (page 25.) Of 45 cumulative AIDS cases reported in blacks, 9 cases (20.0%) were from Dunklin County and 8 (17.8%) from New Madrid County.
- Tables 3 and 4 summarize cumulative reported HIV and AIDS cases by race/ethnicity and area.
- Table 8 in the “Missouri” section (page 24) compares the numbers and rates of HIV and AIDS cases reported from persons in the Southeast HIV Region with corresponding numbers and rates of HIV and AIDS cases reported from other areas in the state.
- Table 10 in the “Missouri” section (page 25) shows numbers and rates of HIV cases reported in 2001 by race/ethnicity for the Southeast HIV Region, and compares these figures with those for HIV cases reported from Missouri’s other HIV Regions.
- Figure 8 in the “Missouri” section (page 23) shows, for the counties within the Southeast HIV Region (as well as for the entire state), the numbers of living HIV Disease cases who have been reported to the Missouri Department of Health and Senior Services and who were residents of these counties when diagnosed.

**Table 3. Reported HIV Cases by Race/Ethnicity and Area
Southeast HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic	
	Cases	%	Cases	%	Cases	%
Cape Girardeau County [†]	26	100.0%	17	65.4%	8	30.8%
Scott County [†]	16	100.0%	9	56.3%	7	43.8%
St. Francois County [†]	15	100.0%	14	93.3%	1	6.7%
Pemiscot County [†]	14	100.0%	8	57.1%	6	42.9%
Dunklin County [†]	14	100.0%	11	78.6%	3	21.4%
Butler County [†]	11	100.0%	9	81.8%	2	18.2%
Remainder of Region [†]	43	100.0%	31	72.1%	11	25.6%
Southeast HIV Region [†]	139	100.0%	99	71.2%	38	27.3%

[†] Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

**Table 4. Reported AIDS Cases by Race/Ethnicity and Area
Southeast HIV Region, Cumulative Through December 2001**

Geographic Area	Total		White, Non-Hispanic		Black, Non-Hispanic	
	Cases	%	Cases	%	Cases	%
Cape Girardeau County [†]	52	100.0%	44	84.6%	7	13.5%
St. Francois County [†]	42	100.0%	41	97.6%	1	2.4%
Dunklin County [†]	27	100.0%	18	66.7%	9	33.3%
Scott County [†]	20	100.0%	15	75.0%	5	25.0%
Remainder of Region [†]	112	100.0%	88	78.6%	23	20.5%
Southeast HIV Region [†]	253	100.0%	206	81.4%	45	17.8%

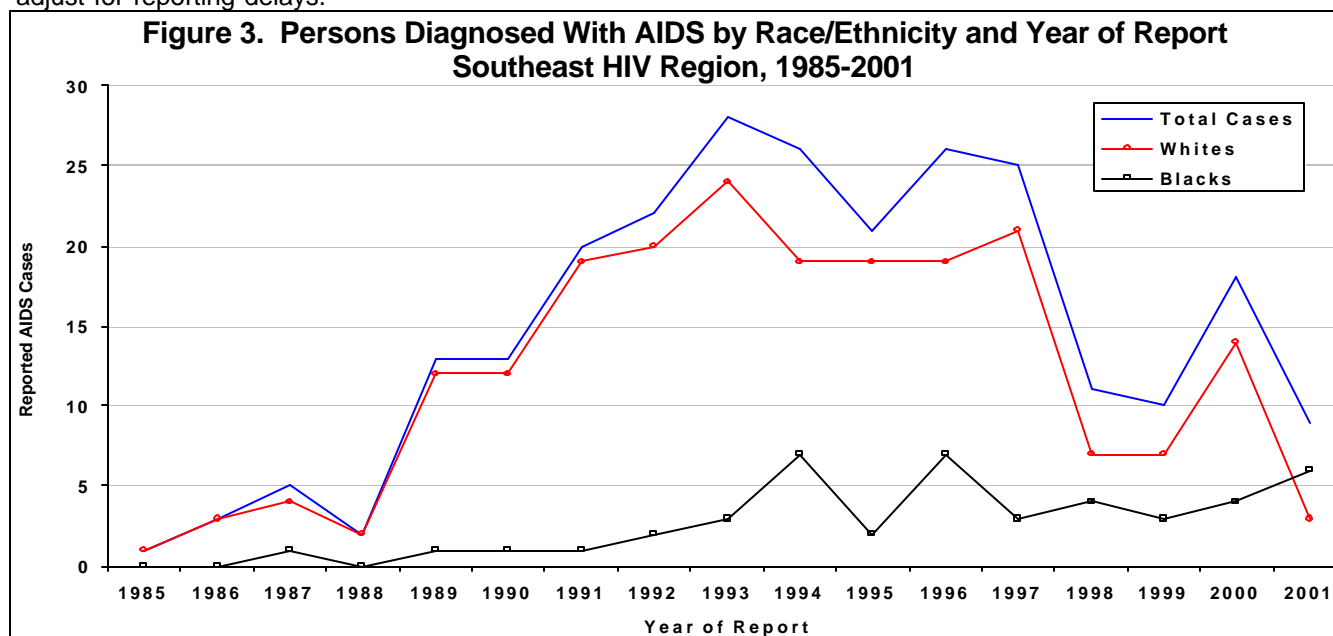
[†] Does not include persons living in correctional facilities at the time of diagnosis.

Note: Row percentages are shown.

HIV Disease Epi Profile Summary: Southeast HIV Region

Trends

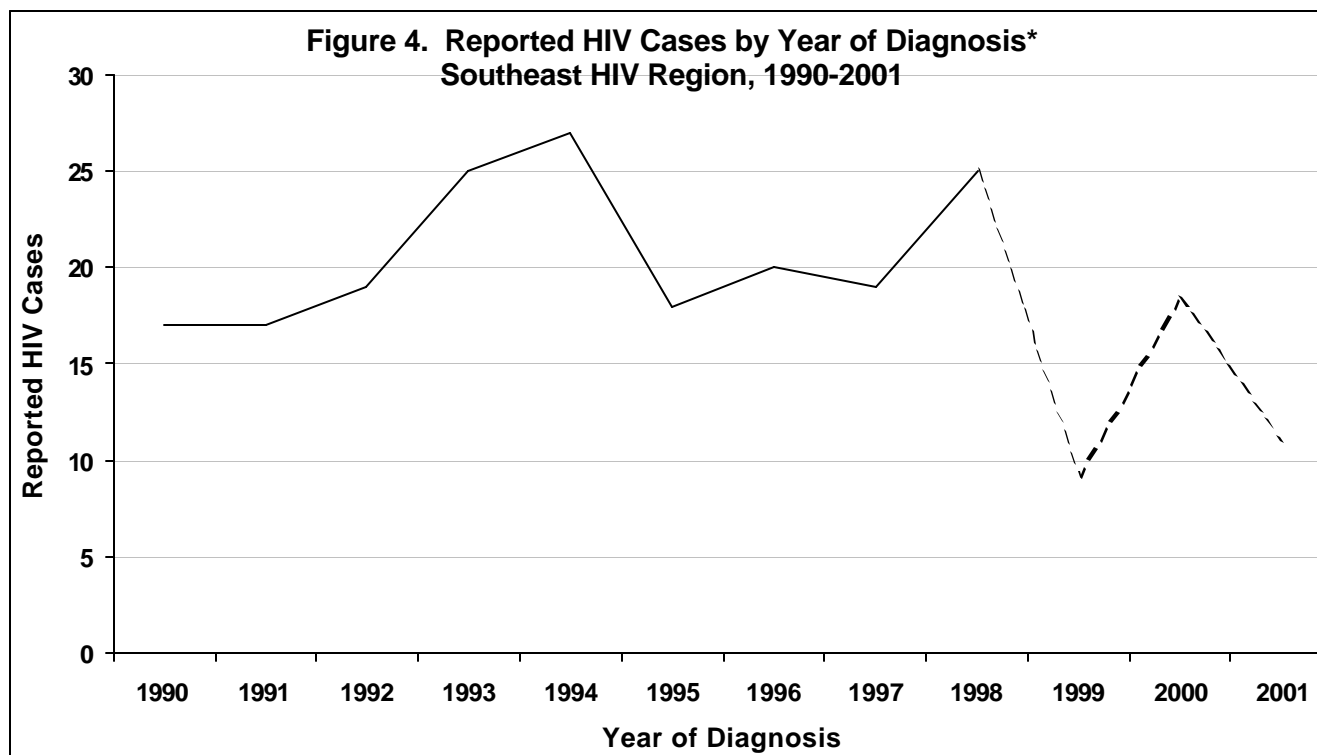
- The 14 HIV Disease cases initially reported in Southeast HIV Region residents in 2001 represented a 39.1% decrease from the 23 cases reported in 2000 (see Figure 1 on page 227).
- The 9 AIDS cases reported in 2001 represented a 50.0% decrease from the 18 cases reported in 2000 (see Figure 2 on page 228).
- From 2000 to 2001, the number of reported AIDS cases in whites decreased by 80.0% (from 15 cases reported in 2000 to 3 cases in 2001), while the small number of reported cases in blacks increased 33.3% (4 cases reported in 2000 to 6 cases in 2001). See Figure 3.
- Comparing reported HIV cases (which generally represent persons more recently infected with HIV) with reported AIDS cases (which generally represent persons less recently infected) is a potential means of discerning which groups are increasingly becoming involved in the epidemic.
 - As indicated in Table 1 (on page 229), a somewhat higher proportion of cumulative HIV cases, compared to cumulative AIDS cases, are female and black, providing some evidence that among more recently infected persons a larger proportion may be female and black.
 - In Table 2 (page 229) cases currently placed in the “Other/Unknown” exposure category have been reassigned to a specific exposure category (such as MSM or heterosexual contact) based on past experience in reassigning such cases following investigation. As a result, HIV and AIDS cases can be better compared with regard to involvement in the epidemic by persons in different exposure categories. The data contained in Table 2 indicate that a somewhat lower proportion of cumulative HIV cases, compared to cumulative AIDS cases, are MSM, and a higher proportion are heterosexual contacts. This provides some evidence that among more recently infected persons, a smaller proportion are MSM and a larger proportion are heterosexual contacts. (However, the largest number of new infections may well continue to result from male homosexual contact.)
- Figure 3 shows reported HIV cases[†] by year of diagnosis^{††} for the period from 1990-2001. The annual numbers of diagnosed HIV have, in general, shown an overall downward trend in recent years. It is estimated that approximately 11 new HIV cases were diagnosed in 2001.
- Figures 4-7 show reported HIV cases[†] by year of diagnosis^{††} according to gender, race/ethnicity, and exposure category. Care should be exercised in interpreting these graphs (and the similar graphs which follow) given the relatively small numbers of cases, and the fact that the numbers for more recent years are estimates that attempt to adjust for reporting delays.



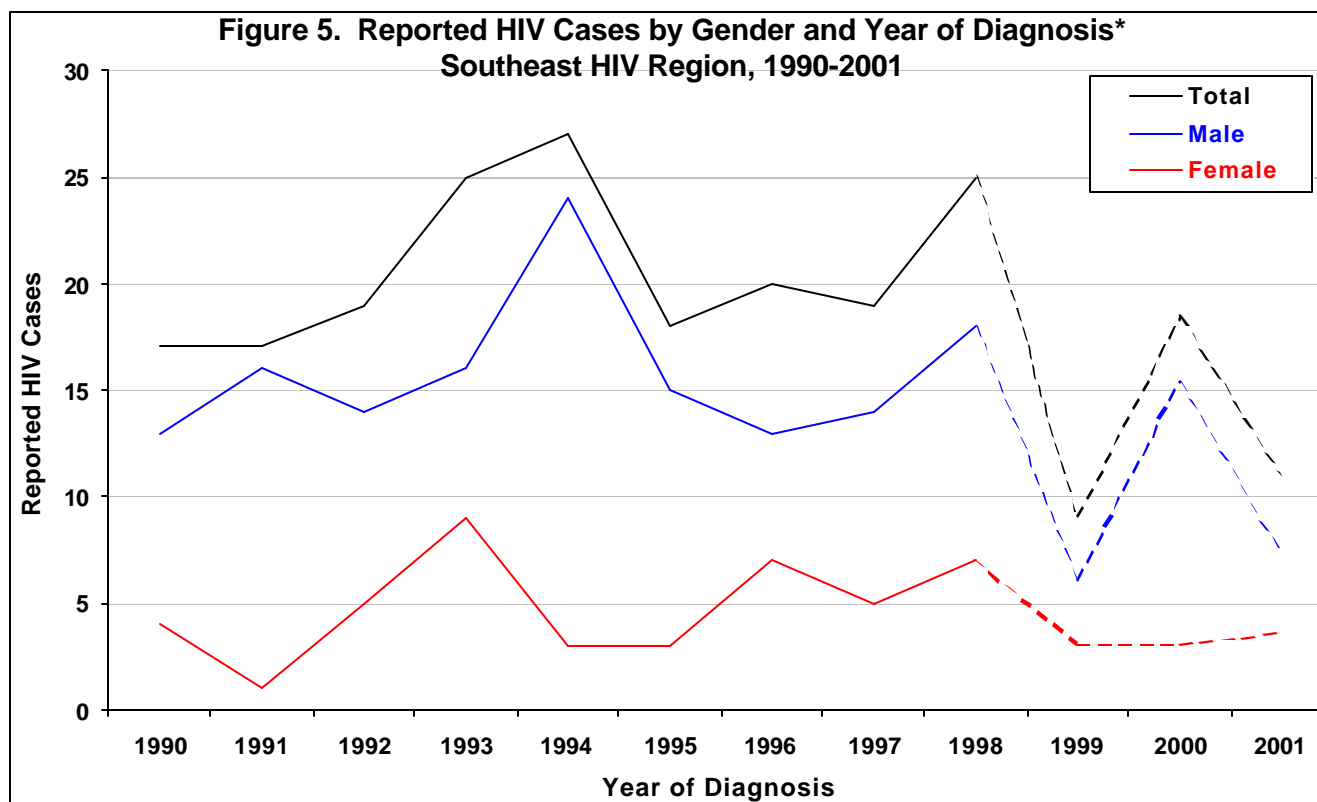
[†] The HIV cases shown in Figures 4-7 represent individuals who were HIV cases (i.e., HIV infected but not AIDS) at the time of initial diagnosis of HIV infection. Some of these individuals have subsequently progressed to AIDS, while the rest currently remain HIV cases. However, in these figures, where the emphasis is on status at the time of initial diagnosis, all are considered HIV cases. (This is in contrast to the way data is presented in Table 1 and similar tables. In these tables, once an individual who is an HIV case meets the case definition for AIDS, he or she is no longer counted as an HIV case, and instead is counted as an AIDS case.)

^{††} Adjustments were made for delays in reporting of cases. That is, for more recent years, not all cases diagnosed during these years have been reported as yet. To adjust for this, estimates were made, based on past experience, of the additional number of cases expected to ultimately be reported, and these expected cases were added to those already reported to give the estimated total number of cases for a given year as shown in the figure.

HIV Disease Epi Profile Summary: Southeast HIV Region

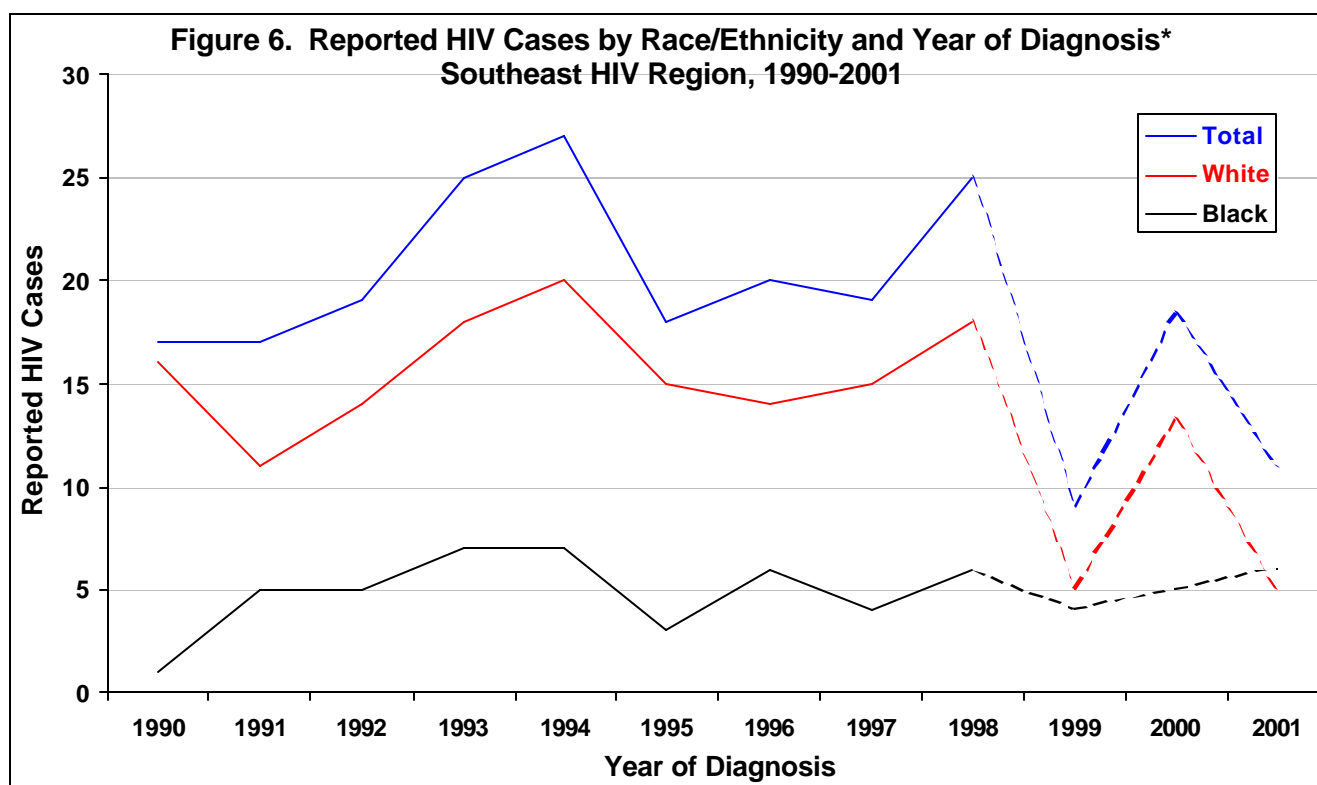


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

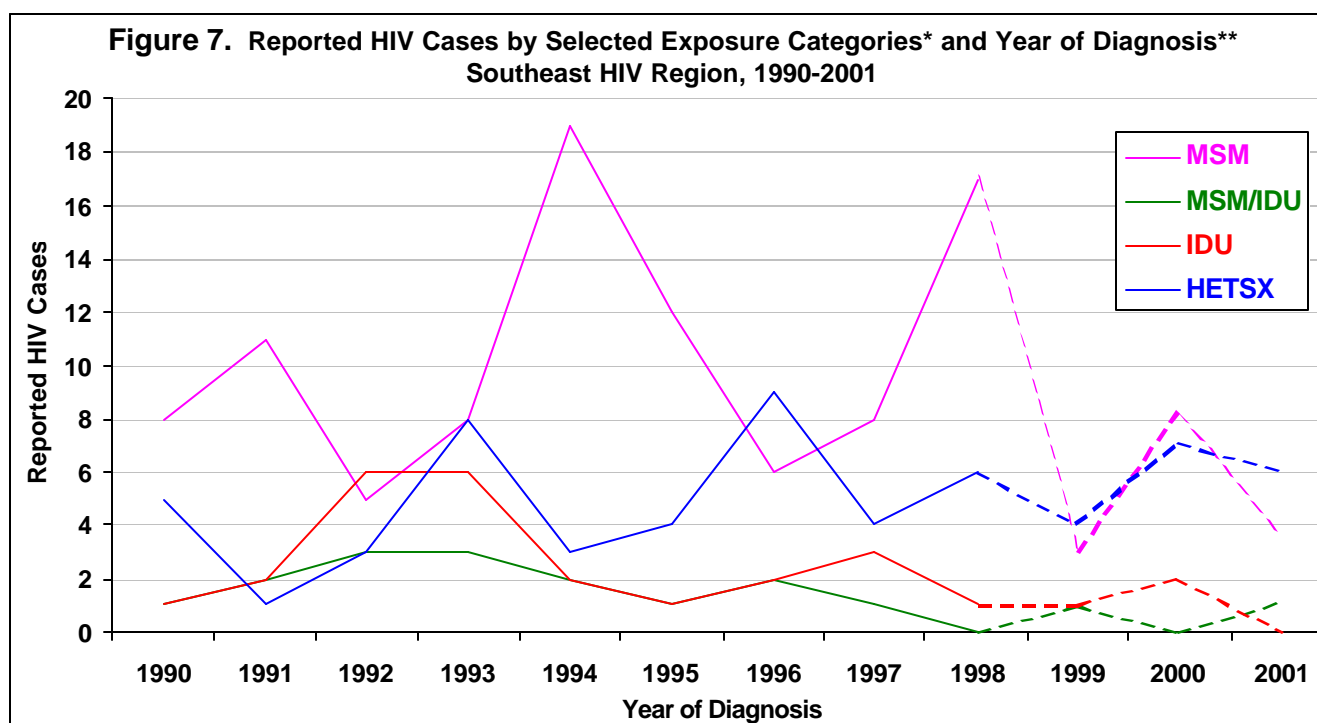


*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

HIV Disease Epi Profile Summary: Southeast HIV Region



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.



*MSM = men who have sex with men; MSM/IDU = men who have sex with men and inject drugs; IDU = injecting drug user; HETSX = heterosexual contact. Cases currently classified as "Risk Not Specified" (RNS), many of which are still under investigation, have been assigned to a specific exposure category in order to more clearly depict trends in diagnosed HIV cases. The proportion assigned to a given exposure category is based on past experience with RNS cases whose exposure risk has been discovered following investigation. Such experience indicates that almost all RNS cases whose exposure risk is eventually determined will be placed in one of the four exposure categories shown in this figure.

**Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

Men Who Have Sex With Men (MSM)

Magnitude of the Problem

- From 1985 through 2001, a total of 181 HIV Disease cases in men who have sex with men (MSM) have been reported in Southeast HIV Region residents (these cases make up 47.0% of all reported adult/adolescent HIV Disease cases in the region). Of these 181 HIV Disease cases, 124 (68.5%) are AIDS cases and 57 (31.5%) are HIV cases.
- The 124 AIDS cases make up 49.8% of all reported adult/adolescent AIDS cases in the region. In 2001, of the 9 adult/adolescent AIDS cases reported, 1 (11.1%) has, to date, been identified as being in an MSM.
- The 57 HIV cases make up 41.9% of all reported adult/adolescent HIV cases in the region. In 2001, of the 8 adult/adolescent HIV cases reported, 3 (37.5%) have, to date, been identified as being in MSM.
- These numbers, however, do not completely indicate the full extent of MSM involvement since for 9 adult/adolescent AIDS cases, and 13 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the "Other/Unknown" exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with "Other/Unknown" cases whose exposure category was determined following investigation, the result would be that seen in Table 2 (on page 229). Here it is estimated that approximately 130 (52.2%) of the 249 total reported adult/adolescent AIDS cases were in MSM. Likewise, it is estimated that approximately 62 (45.6%) of the 136 total reported adult/adolescent HIV cases were in MSM.

Who

- Table 5 shows reported HIV and AIDS cases in MSM by race/ethnicity.
- Of total reported HIV cases among MSM, white men comprise 89.5%, and black men 8.8%.
- White men comprise 93.5% of total reported AIDS cases among MSM, and black men 4.8%.
- Table 6 shows reported HIV cases in MSM by age group. Among white MSM, the largest proportion of reported HIV cases (51.0%) were in men 20-29 years of age at the time of initial diagnosis. Among black MSM, the largest proportion of cases (80.0%) were also in men 20-29 years of age at the time of diagnosis.
- Information obtained through interviews with reported MSM HIV and AIDS cases indicates that at least 38% of these men (37% of white men and 55% of black men) have, in addition to having sex with other men, also had sex with females. (Note that the true percentages may actually be higher because complete information may not have been obtained on all reported cases.)

Where

- Of the 57 total HIV cases reported in MSM, 14 (24.6%) were from Cape Girardeau County, 10 (17.5%) from St. Francois County, and 7 (12.3%) from Pemiscot County. The remaining cases were from 12 other counties of the HIV region (each of these counties reported 1-6 cases).
- Table 7 shows reported HIV cases in MSM by geographic area.

Trends

- The annual numbers of diagnosed HIV cases in MSM have, in general, shown an overall downward trend in recent years. It is estimated that approximately 4 MSM HIV cases were diagnosed in 2001. See Figure 8.
- As indicated in Table 2 on page 229, a somewhat lower proportion of cumulative HIV cases (45.6%), compared to cumulative AIDS cases (52.2%), appear to be MSM, providing some evidence that among more recently infected persons a smaller proportion are MSM.

HIV Disease Epi Profile Summary: Southeast HIV Region

**Table 5. Reported HIV and AIDS Cases in Men Who Have Sex With Men by Race/Ethnicity
Southeast HIV Region, Cumulative Through December 2001**

Race/Ethnicity	HIV Cases Cumulative		AIDS Cases Cumulative	
	Cases	%	Cases	%
White	51	(89.5%)	116	(93.5%)
Black	5	(8.8%)	6	(4.8%)
Other/Unknown	1	(1.8%)	2	(1.6%)
Southeast HIV Region Total	57	(100.0%)	124	(100.0%)

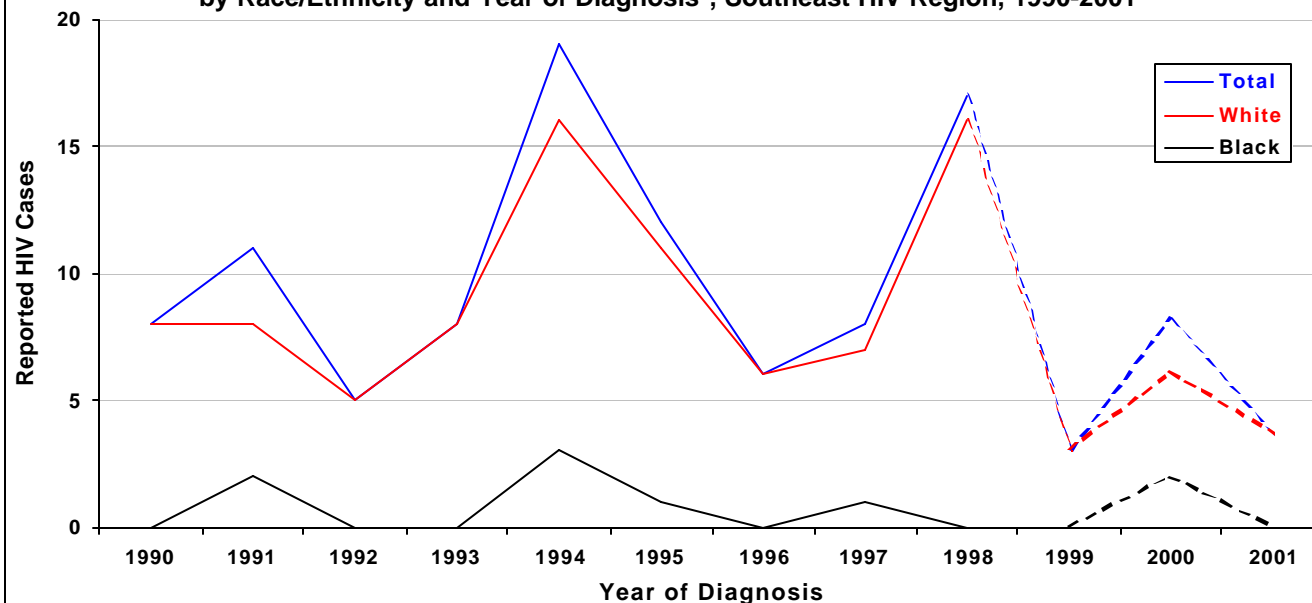
**Table 6. Reported HIV Cases in Men Who Have Sex With Men by Age Group
Southeast HIV Region, Cumulative Through December 2001**

Age Group	Total	
	Cases	%
13-19	2	(3.5%)
20-29	31	(54.4%)
30-39	17	(29.8%)
40-49	4	(7.0%)
50+	3	(5.3%)
Southeast HIV Region Total	57	(100.0%)

**Table 7. Reported HIV Cases in Men Who Have Sex With Men by Geographic Area
Southeast HIV Region, Cumulative Through December 2001**

Geographic Area	Total	
	Cases	%
Cape Girardeau County	14	(24.6%)
St. Francois County	10	(17.5%)
Pemiscot County	7	(12.3%)
Remaining Counties	26	(45.6%)
Southeast HIV Region Total	57	(100.0%)

**Figure 8. Reported HIV Cases in Men Who Have Sex With Men
by Race/Ethnicity and Year of Diagnosis*, Southeast HIV Region, 1990-2001**



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

Men Who Have Sex With Men and Inject Drugs (MSM/IDU)

Magnitude of the Problem

- From 1985 through 2001, a total of 27 HIV Disease cases in MSM/IDUs have been reported in Southeast HIV Region residents (these cases make up 7.0% of all reported adult/adolescent HIV Disease cases in the region). Of these 27 HIV Disease cases, 16 (59.3%) are AIDS cases and 11 (40.7%) are HIV cases.
- The 16 AIDS cases make up 6.4% of all reported adult/adolescent AIDS cases in the region.
- The 11 HIV cases make up 8.1% of total reported adult/adolescent HIV cases in the region.

Who

- Table 8 shows reported HIV and AIDS cases in MSM/IDUs by race/ethnicity.
- Of the 11 total reported HIV cases among MSM/IDUs, white men comprise 81.8%, and black men make up 18.2%.
- White men comprise 87.5% of the 16 total reported AIDS cases among MSM/IDUs, and black men make up 12.5%.
- Table 9 shows reported HIV cases in MSM/IDUs by age group. The largest proportion of reported HIV cases (54.5%) were in men 30-39 years of age at the time of initial diagnosis.
- Information obtained through interviews with reported MSM/IDU HIV and AIDS cases indicates that at least 56% of these men (52% of white men and 75% of black men) have, in addition to having sex with other men, also had sex with females. (Note that the true percentages may actually be higher because complete information may not have been obtained on all reported cases.)

Where

- The 11 total HIV cases in MSM/IDUs were from 8 counties in the region (each of these counties reported 1-4 cases).

Trends

- During each of the past five years, from 0-1 HIV cases have been diagnosed in MSM/IDUs.

HIV Disease Epi Profile Summary: Southeast HIV Region

Table 8. Reported HIV and AIDS Cases in Men Who Have Sex With Men and Inject Drugs by Race/Ethnicity, Southeast HIV Region, Cumulative Through December 2001

Race/Ethnicity	HIV Cases Cumulative		AIDS Cases Cumulative	
	Cases	%	Cases	%
White	9	(81.8%)	14	(87.5%)
Black	2	(18.2%)	2	(12.5%)
Southeast HIV Region Total	11	(100.0%)	16	(100.0%)

Table 9. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs by Age Group, Southeast HIV Region, Cumulative Through December 2001

Age Group	Total	
	Cases	%
13-19	1	(9.1%)
20-29	2	(18.2%)
30-39	6	(54.5%)
40+	2	(18.2%)
Southeast HIV Region Total	11	(100.0%)

Table 10. Reported HIV Cases in Men Who Have Sex With Men and Inject Drugs Southeast HIV Region, Cumulative Through December 2001

The 11 total HIV cases in MSM/IDUs were from 8 counties in the region
(each of these counties reported 1-4 cases).

Southeast HIV Region Total **11** **(100.0%)**

Injecting Drug Users (IDUs)

Magnitude of the Problem

- From 1985 through 2001, a total of 48 HIV Disease cases in IDUs[†] have been reported in Southeast HIV Region residents (these cases make up 12.5% of all reported adult/adolescent HIV Disease cases in the region). Of these 48 HIV Disease cases, 35 (72.9%) are AIDS cases and 13 (27.1%) are HIV cases.
- The 35 AIDS cases make up 14.1% of all reported adult/adolescent AIDS cases in the region.
- The 13 HIV cases make up 9.6% of total reported adult/adolescent HIV cases in the region.

Who

- Table 11 shows reported HIV and AIDS cases in IDUs by race/ethnicity and gender.
- White males comprise 61.5% of the 13 total reported HIV cases among IDUs; black females make up 15.4%; white females 15.4%; and black males 7.7%.
- White males comprise 54.3% of the 35 total reported AIDS cases among IDUs; black males make up 17.1%; white females 17.1%; and black females 11.4%.
- Table 12 shows reported HIV cases in IDUs by age group. The largest proportion of reported HIV cases (61.5%) were in persons 30-39 years of age at the time of initial diagnosis.

Where

- Of the 13 total HIV cases reported in IDUs, 4 (30.8%) were from Dunklin County. The remaining 9 (69.2%) cases were from 6 other counties in the region (each county reported 1-2 cases).
- Table 13 shows reported HIV cases in IDUs by geographic area.

Trends

- During each of the past five years, from 0-3 HIV cases have been diagnosed in IDUs.

[†] Each male IDU case denied any homosexual contact; if such contact were reported, the case would have been placed in the men who have sex with men and inject drugs [MSM/IDU] exposure category.

HIV Disease Epi Profile Summary: Southeast HIV Region

**Table 11. HIV and AIDS Cases in Injecting Drug Users by Race/Ethnicity and Gender
Southeast HIV Region, Cumulative Through December 2001**

Race/Ethnicity and Gender	HIV Cases Cumulative		AIDS Cases Cumulative	
	Cases	%	Cases	%
White Male	8	(61.5%)	19	(54.3%)
Black Male	1	(7.7%)	6	(17.1%)
White Female	2	(15.4%)	6	(17.1%)
Black Female	2	(15.4%)	4	(11.4%)
Southeast HIV Region Total	13	(100.0%)	35	(100.0%)

**Table 12. Reported HIV Cases in Injecting Drug Users by Age Group
Southeast HIV Region, Cumulative Through December 2001**

Age Group	Total	
	Cases	%
13-19	1	(7.7%)
20-29	1	(7.7%)
30-39	8	(61.5%)
40+	3	(23.1%)
Southeast HIV Region Total	13	(100.0%)

**Table 13. Reported HIV Cases in Injecting Drug Users by Geographic Area
Southeast HIV Region, Cumulative Through December 2001**

Geographic Area	Total	
	Cases	%
Dunklin County	4	(30.8%)
Remaining Counties	9	(69.2%)
Southeast HIV Region Total	13	(100.0%)

Heterosexual Contacts

Magnitude of the Problem

- From 1985 through 2001, a total of 86 HIV Disease cases in heterosexual contacts have been reported in Southeast HIV Region residents (these cases make up 22.3% of all reported adult/adolescent HIV Disease cases in the region). Of these 86 HIV Disease cases 47 (54.7%) are AIDS cases and 39 (45.3%) are HIV cases.
- The 47 heterosexual contact AIDS cases make up 18.9% of all reported adult/adolescent AIDS cases in the region. In 2001, of the 9 adult/adolescent AIDS cases reported, 4 (44.4%) have, to date, been identified as being in heterosexual contacts.
- The 39 heterosexual contact HIV cases make up 28.7% of total reported adult/adolescent HIV cases in the region. In 2001, of the 8 adult/adolescent HIV cases reported, 2 (25.0%) have, to date, been identified as being in heterosexual contacts.
- These numbers, however, do not completely indicate the full extent of heterosexual contact involvement since for 9 adult/adolescent AIDS cases, and 13 adult/adolescent HIV cases, the specific exposure category has not yet been determined. These cases are, in general, still under investigation and are currently in the “Other/Unknown” exposure category. If these cases were all assigned to a specific exposure category (e.g., MSM, MSM/IDU, IDU, or heterosexual contact) based on past experience with “Other/Unknown” cases whose exposure category was determined following investigation, the result would be that seen in Table 2 on page 229. Here it is estimated that approximately 49 (19.7%) of the 249 total reported adult/adolescent AIDS cases were in heterosexual contacts. Likewise, it is estimated that approximately 45 (33.1%) of the 136 total reported adult/adolescent HIV cases were in heterosexual contacts.

Who

- Table 14 shows reported HIV and AIDS cases in heterosexual contacts by race/ethnicity and gender.
- White females comprise 35.9% of the 39 total reported HIV cases among heterosexual contacts; black females make up 30.8%; white males 17.9%; and black males 15.4%.
- Black females comprise 40.4% of the 47 total reported AIDS cases among heterosexual contacts; white females make up 36.2%; white males 14.9%; and black males 8.5%.
- Table 15 shows reported HIV cases in heterosexual contacts by age group. The largest proportion of reported HIV cases (33.3%) were in persons 20-29 years of age at the time of initial diagnosis. Seven (17.9%) of the 39 reported HIV cases in heterosexual contacts were diagnosed while in their teens.

Where

- Of the 39 total HIV cases reported in heterosexual contacts, 6 (15.4%) were from Butler County, 6 (15.4%) from Scott County; 5 (12.8%) from Cape Girardeau County, 4 (10.3%) from Dunklin County, and 4 (10.3%) from Mississippi County. Fourteen (35.9%) cases were reported from 9 other counties in the region (each of these counties reported 1-3 cases).
- Table 16 shows reported HIV cases in heterosexual contacts by geographic area.

Trends

- As indicated in Table 2 (on page 229), a higher proportion of cumulative HIV cases (33.1%), compared to cumulative AIDS cases (19.7%), appear to be heterosexual contacts, providing evidence that among more recently infected persons a larger proportion are heterosexual contacts.
- The annual number of diagnosed HIV cases in heterosexual contacts in recent years has been relatively small, and no clear upward or downward trends are discernable. It is estimated that approximately 6 heterosexual contact HIV cases were diagnosed in 2001. See Figure 9.

HIV Disease Epi Profile Summary: Southeast HIV Region

**Table 14. Reported HIV and AIDS Cases in Heterosexual Contacts by Race/Ethnicity and Gender
Southeast HIV Region, and Cumulative Through December 2001**

Race/Ethnicity and Gender	HIV Cases Cumulative		AIDS Cases Cumulative	
	Cases	%	Cases	%
White Male	7	(17.9%)	7	(14.9%)
Black Male	6	(15.4%)	4	(8.5%)
White Female	14	(35.9%)	17	(36.2%)
Black Female	12	(30.8%)	19	(40.4%)
Southeast HIV Region Total	39	(100.0%)	47	(100.0%)

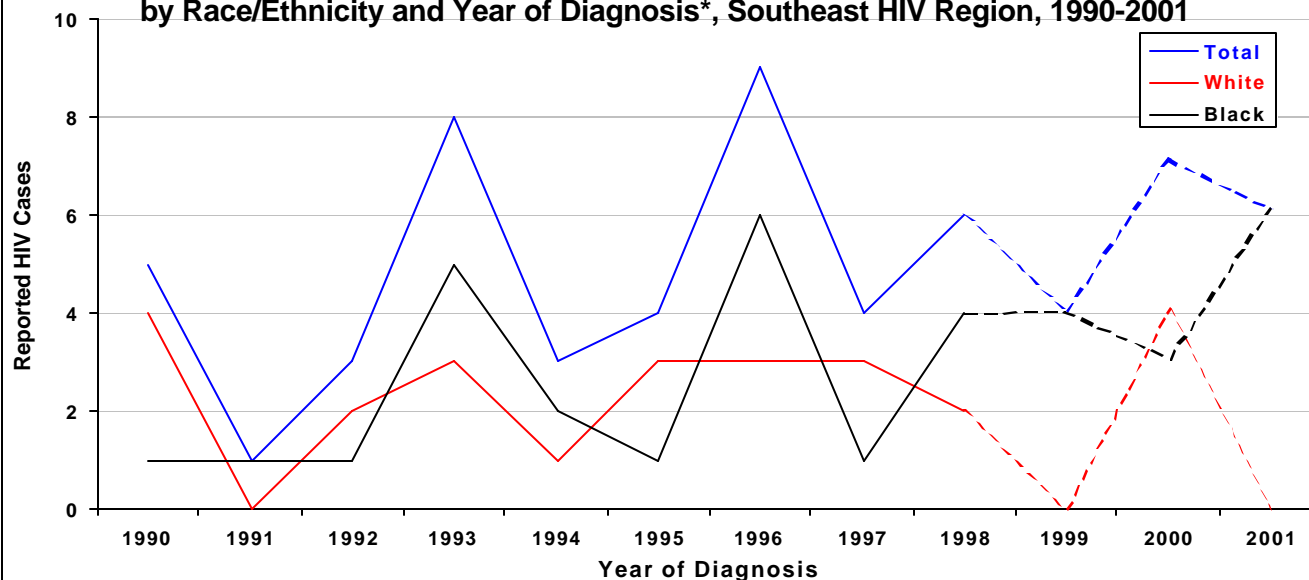
**Table 15. Reported HIV Cases in Heterosexual Contacts by Age Group
Southeast HIV Region, Cumulative Through December 2001**

Age Group	Total	
	Cases	%
13-19	7	(17.9%)
20-29	13	(33.3%)
30-39	8	(20.5%)
40+	11	(28.2%)
Southeast HIV Region Total	39	(100.0%)

**Table 16. Reported HIV Cases in Heterosexual Contacts by Geographic Area
Southeast HIV Region, Cumulative Through December 2001**

Geographic Area	Total	
	Cases	%
Butler County	6	(15.4%)
Scott County	6	(15.4%)
Cape Girardeau County	5	(12.8%)
Dunklin County	4	(10.3%)
Mississippi County	4	(10.3%)
Remaining Counties	14	(35.9%)
Southeast HIV Region Total	39	(100.0%)

**Figure 9. Reported HIV Cases in Heterosexual Contacts
by Race/Ethnicity and Year of Diagnosis*, Southeast HIV Region, 1990-2001**



*Numbers of cases for 1999-2001, shown by the dashed lines, are adjusted for reporting delays.

STD Epi Profile Summary: Southeast HIV Region

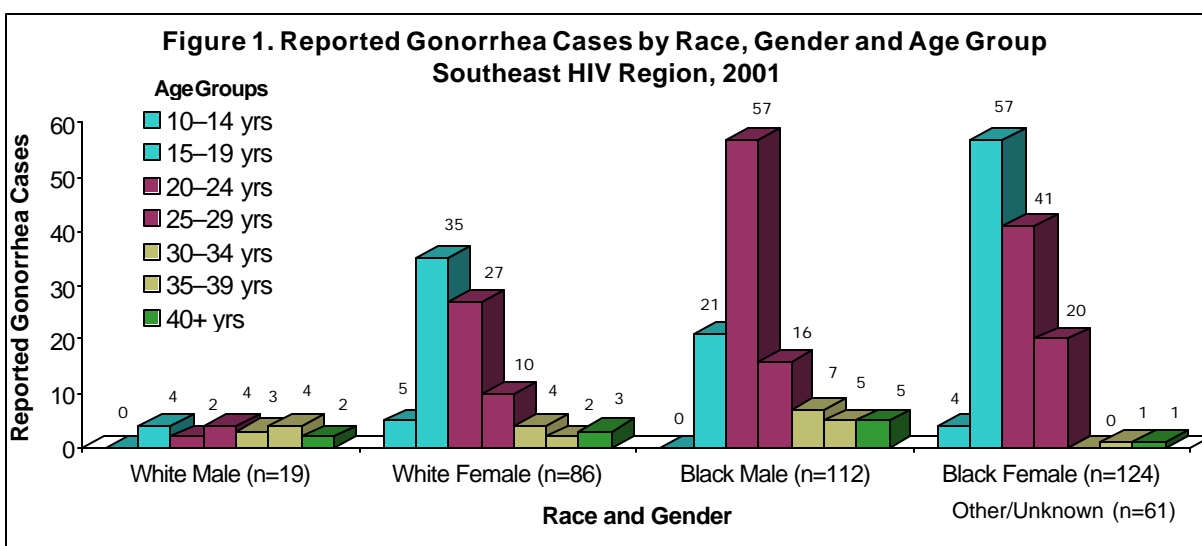
Gonorrhea

Magnitude of the Problem

- During 2001, 402 cases of gonorrhea were reported in the Southeast HIV Region; the corresponding rate* was 84.5 cases per 100,000 population.

Who

- Of the 402 gonorrhea cases reported in 2001, 148 (36.8%) were in males and 254 (63.2%) were in females. Among whites, a much higher proportion of cases were reported in females (81.9%) than in males (18.1%). Among blacks, a slightly higher proportion of cases were reported in females (52.5%) than in males (47.5%).
- Of the 402 gonorrhea cases reported in 2001, 105 (26.1%) were in whites and 236 (58.7%) were in blacks. Three (0.7%) cases were in other racial groups, and for 58 (14.4%) cases, race was unknown.
- The rate* of reported cases in blacks (796.7) was about 33 times the rate* in whites (23.9).
- Table 1 on page 243 shows the numbers and rates of reported gonorrhea cases by race.
- Of the 402 gonorrhea cases reported in 2001, 152 (37.8%) were in teenagers. Teenagers made up 61 (49.2%) of the 124 black female cases, 40 (46.5%) of the 86 white female cases, 21 (18.8%) of the 112 black male cases, and 4 (21.1%) of the 19 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 402 gonorrhea cases reported, 105 (26.1%) were from Cape Girardeau County, 74 (18.4%) from Scott County, and 45 (11.2%) from Mississippi County. The remaining counties in the region each had from 0-43 cases reported. Cases were reported from 19 (95.0%) of the region's 20 counties. Table 2 shows the number and percentage of cases reported from those counties having the largest numbers of cases. Figure 2 is a map showing cases by county.
- The highest rate* of reported gonorrhea cases in 2001 was in Mississippi County (337.4). Table 2 shows rates of reported cases for counties with the most cases. Table 3 shows rates of reported cases by race in selected counties.

Trends

- In recent years, the annual numbers of reported gonorrhea cases from the Southeast HIV Region have remained generally plateaued.
- Figure 3 shows trends in reported gonorrhea cases by race from 1992-2001. The 402 gonorrhea cases reported in 2001 represented a 1.0% decrease from the 406 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: Southeast HIV Region

Table 1. Reported Gonorrhea Cases and Rates by Race, Southeast HIV Region, 2001

	Cases	%	Rate*
Whites	105	26.1%	23.9
Blacks	236	58.7%	796.7
Other/Unknown	61	15.2%	—
Total Cases	402	100.0%	84.5

Table 2. Reported Gonorrhea Cases and Rates by Selected Counties, Southeast HIV Region, 2001

	Cases	%	Rate*
Cape Girardeau	105	26.1%	156.3
Scott	74	18.4%	182.4
Mississippi	45	11.2%	337.4
Pemiscot	43	10.7%	203.3
Dunklin	29	7.2%	89.2
New Madrid	28	7.0%	140.5
Butler	25	6.2%	61.9
Total Cases	402	100.0%	84.5

*Per 100,000 population

Figure 2. Reported Gonorrhea Cases by County Southeast HIV Region, 2001

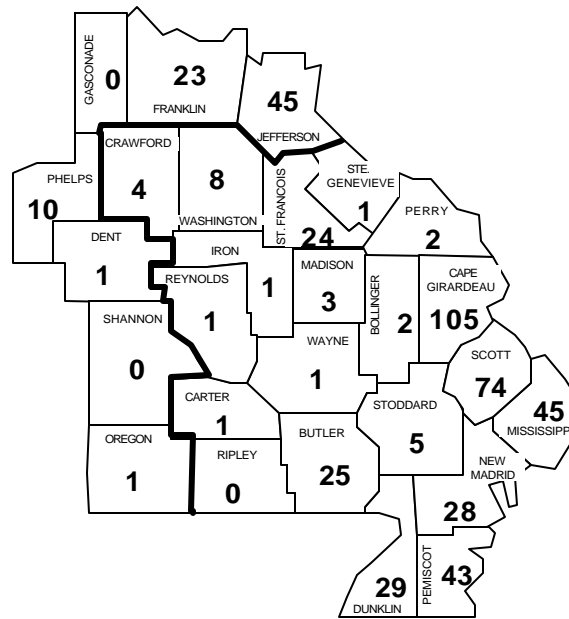


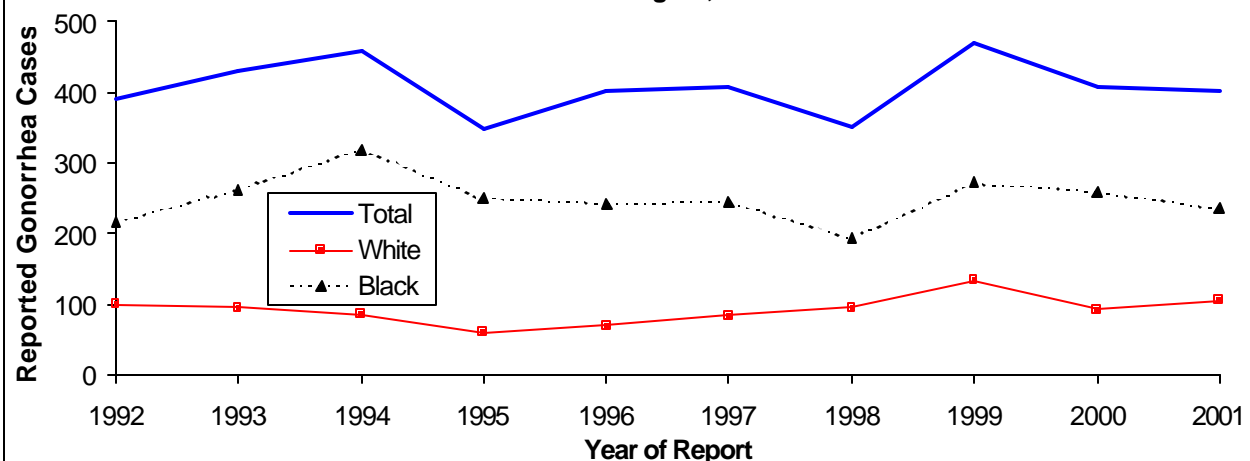
Table 3. Reported Gonorrhea Cases and Rates by Race in Selected Counties, Southeast HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Cape Girardeau County	105	100.0%	156.3	27	25.7%	43.5	67	70.4%	1724.6
Scott County	74	100.0%	182.4	20	27.0%	55.9	52	70.3%	1205.7
Mississippi County	45	100.0%	337.4	1	2.2%	9.8	43	95.6%	1414.5
Pemiscot County	43	100.0%	203.3	6	14.0%	40.9	36	83.7%	573.7
Dunklin County	29	100.0%	89.2	8	27.6%	27.6	9	31.0%	289.2
New Madrid County	28	100.0%	140.5	6	21.4%	37.4	15	53.6%	406.8
Butler County	25	100.0%	61.9	3	12.0%	8.0	7	28.0%	282.6
Southwest HIV Region	402	100.0%	84.5	105	26.1%	23.9	236	58.7%	795.6

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

Figure 3. Reported Gonorrhea Cases by Race and Year of Report Southeast HIV Region, 1992–2001



STD Epi Profile Summary: Southeast HIV Region

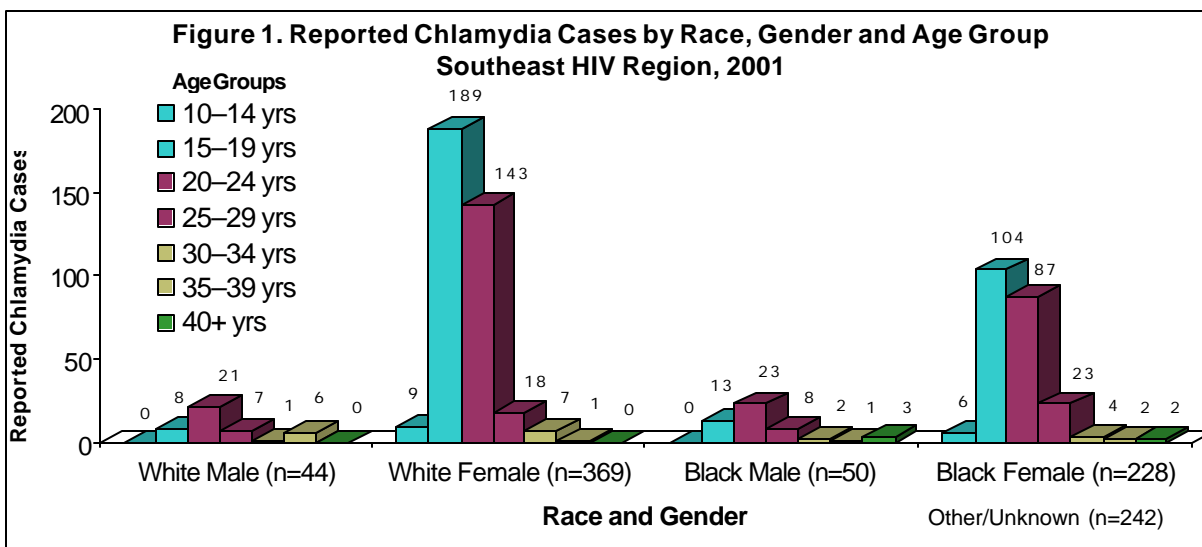
Chlamydia

Magnitude of the Problem

- During 2001, 933 cases of chlamydia were reported in the Southeast HIV Region; the corresponding rate* was 196.1 cases per 100,000 population.

Who

- Of the 933 chlamydia cases reported in 2001, 125 (13.4%) were in males and 808 (86.7%) were in females.
- Of the 933 chlamydia cases reported in 2001, 413 (44.3%) were in whites and 278 (29.8%) were in blacks. Eleven (1.2%) cases were in other racial groups, and for 231 (24.8%) cases, race was unknown.
- The rate* of reported cases in blacks (938.5) was about 10 times the rate* in whites (93.9).
- Table 1 on page 245 shows the numbers and rates of reported chlamydia cases by race.
- Of the 933 chlamydia cases reported in 2001, 453 (48.6%) were in teenagers. Teenagers made up 110 (48.2%) of the 228 black female cases, 198 (53.7%) of the 369 white female cases, 13 (26.0%) of the 50 black male cases, and 8 (18.2%) of the 44 white male cases.
- Figure 1 shows the distribution of cases by age group for white males and females, and black males and females.



Where

- In 2001, of the 933 chlamydia cases reported, 189 (20.3%) were from Cape Girardeau County, 136 (14.6%) from Scott County, 102 (10.9%) from Pemiscot County, and 100 (10.7%) from Butler County. The remaining counties in the region each had from 3-75 cases reported. Cases were reported from all 20 of the region's counties. Table 2 shows the number and percentage of cases reported from those counties having the largest numbers of cases. Figure 2 is a map showing cases by county.
- The highest rate* of reported chlamydia cases in 2001 was in Pemiscot County (482.3). Table 2 shows rates of reported cases for counties with the most cases. Table 3 shows rates of reported cases by race in selected counties.

Trends

- Since the mid-1990s, the annual numbers of reported chlamydia cases from the Southeast HIV Region have shown a general upward trend.
- Figure 3 shows trends in reported chlamydia cases by race from 1992-2001. The 933 cases reported in 2001 represented a 12.3% increase from the 831 cases reported in 2000.

*Per 100,000 population

STD Epi Profile Summary: Southeast HIV Region

Table 1. Reported Chlamydia Cases and Rates by Race, Southeast HIV Region, 2001

	Cases	%	Rate*
Whites	413	44.3%	93.9
Blacks	278	29.8%	938.5
Other/Unknown	242	25.9%	—
Total Cases	933	100.0%	196.1

Table 2. Reported Chlamydia Cases and Rates by Selected Counties, Southeast HIV Region, 2001

	Cases	%	Rate*
Cape Girardeau.....	189	20.3%	281.3
Scott.....	136	14.6%	335.3
Pemiscot	102	10.9%	482.3
Butler	100	10.7%	247.7
Dunklin	75	8.0%	230.6
St. Francois	72	7.7%	129.1
New Madrid	61	6.5%	306.0
Stoddard	51	5.5%	172.1
Crawford	38	4.1%	169.4
Mississippi.....	37	4.0%	277.4
Total Cases	933	100.0%	196.1

*Per 100,000 population

Figure 2. Reported Chlamydia Cases by County Southeast HIV Region, 2001

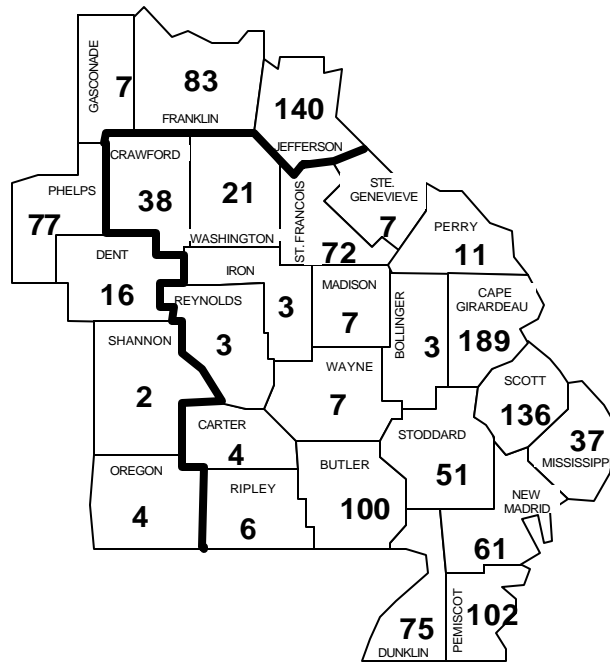


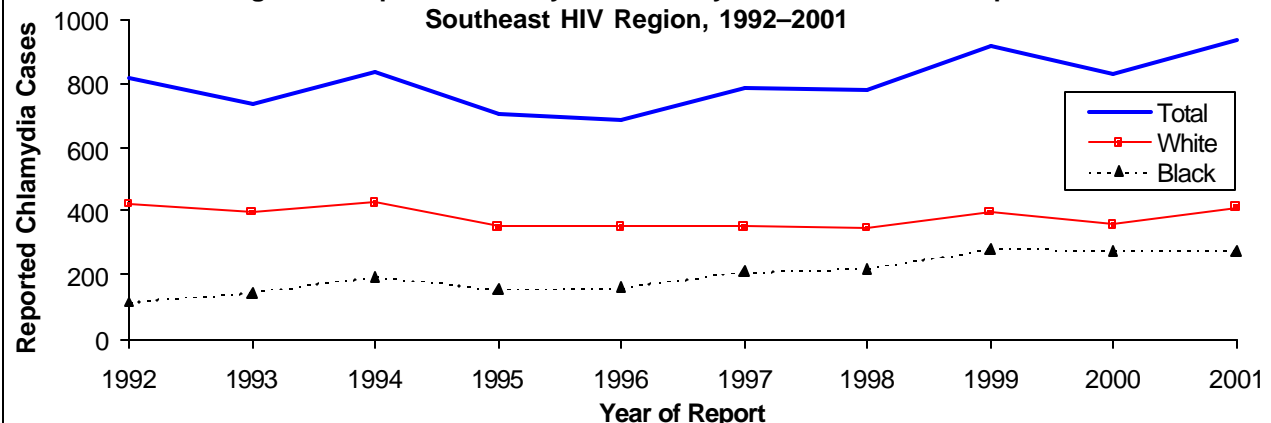
Table 3. Reported Chlamydia Cases and Rates by Race in Selected Counties, Southeast HIV Region, 2001

County	Total			White			Black		
	Cases	%	Rate**	Cases	%	Rate**	Cases	%	Rate**
Cape Girardeau County	189	100.0%	281.3	105	55.6%	169.2	58	30.7%	1492.9
Scott County	136	100.0%	335.3	69	50.7%	192.9	57	41.9%	1321.6
Pemiscot County	102	100.0%	482.3	17	16.7%	115.8	78	76.5%	1243.0
Butler County	100	100.0%	247.7	30	30.0%	80.5	13	13.0%	524.8
Dunklin County	75	100.0%	230.6	18	24.0%	62.0	20	26.7%	642.7
St. Francois County	72	100.0%	129.1	46	63.9%	85.7	6	8.3%	435.4
New Madrid County	61	100.0%	306.0	22	36.1%	137.0	23	37.7%	623.8
Stoddard County	51	100.0%	172.1	22	43.1%	76.4	0	0.0%	0.0
Crawford County	38	100.0%	169.4	21	55.3%	94.9	0	0.0%	0.0
Mississippi County	37	100.0%	277.4	14	37.8%	137.1	21	56.8%	690.8
Southwest HIV Region	933	100.0%	196.1	413	44.3%	93.9	278	29.8%	938.5

*Per 100,000 Population. Note that when the number of cases is less than 5, the rate is considered unstable and should be interpreted with caution.

Note: Row percentages are shown.

Figure 3. Reported Chlamydia Cases by Race and Year of Report Southeast HIV Region, 1992–2001



HIV Disease Epidemiologic Reports

DHSS. **HIV/AIDS: Scientific Studies and Reports** (Includes links to current and past editions of the Missouri *HIV/STD Epidemiologic Profiles* [formerly the *KWIK Facts*], as well as to current and past editions of *HIV/STD Statistics*.)

<http://www.dhss.state.mo.us/GLRequest/ID/SSRHIVAIDS.html>

CDC. **HIV/AIDS Basic Statistics**

<http://www.cdc.gov/hiv/stats.htm>

CDC. **HIV/AIDS Surveillance Report**

<http://www.cdc.gov/hiv/stats/hasrlink.htm>

HIV Disease Web Sites

DHSS: **HIV/AIDS**

<http://www.dhss.state.mo.us/GLRequest/ID/HIVAIDS.html>

DHSS. **Section of STD/HIV**

<http://www.dhss.state.mo.us/sshapcs/SSHAPCS.html>

CDC **Division of HIV/AIDS Prevention Home Page**

<http://www.cdc.gov/hiv/dhap.htm>

CDC. **National Prevention Information Network (NPIN) - HIV/AIDS Resources**

<http://www.cdcnpin.org/hiv/start.htm>

NIAID. **NIAID Publications on HIV/AIDS**

<http://www.niaid.nih.gov/publications/aids.htm>

National Library of Medicine. **HIV/AIDS Information**

<http://sis.nlm.nih.gov/HIV/HIVMain.html>

Helena Hatch Special Care Center for Women (St. Louis)

http://hhsc.wustl.edu/docs/fr_index_contents.htm

Project A.R.K. - AIDS/HIV Resources for Kids (St. Louis)

<http://peds.wustl.edu/div/id/spec/>

Journal of the American Medical Association **HIV/AIDS Information Center**

<http://www.ama-assn.org/special/hiv/hivhome.htm>

Healthfinder[®] (A gateway consumer health and human services information web site from the U.S. Government.)

<http://www.healthfinder.gov/default.htm>

DHSS = Missouri Department of Health and Senior Services

CDC = Centers for Disease Control and Prevention

NIAID = National Institute of Allergy and Infectious Diseases

HRSA=Health Resources and Services Administration

USPHS = U.S. Public Health Service

HIV Disease Internet Resources: Missouri

HIV Disease Treatment/Prevention Information

USPHS. **HIV/AIDS Treatment Information Service (ATIS)** (Includes current HIV treatment and prevention guidelines.)

<http://www.hivatis.org/>

HIV InSite Knowledge Base (A comprehensive, on-line textbook of HIV disease from the University of California San Francisco and San Francisco General Hospital.)

<http://hivinsite.ucsf.edu/InSite.jsp?page=KB>

Medical Management of HIV Infection by John G. Bartlett, M.D. and Joel E. Gallant, M.D., M.P.H. (A handbook of HIV disease management that serves as the standard of care for the Johns Hopkins AIDS Service and has been accepted as the standard of care for quality assurance by Maryland Medicaid.)

http://www.hopkins-aids.edu/publications/book/book_toc.html

HRSA. **A Guide to the Clinical Care of Women With HIV**

<http://hab.hrsa.gov/womencare.htm>

HRSA. **HIV/AIDS Services**

<http://hab.hrsa.gov/>

HIV Disease Clinical Trials and Patient Care Information

CDC. **Taking Part in Research Studies: What Questions Should You Ask?**

<http://www.cdc.gov/hiv/pubs/brochure/unc3bro.htm>

USPHS. **AIDS Clinical Trials Information Service (ACTIS)**

<http://www.actis.org/>

The Pediatric AIDS Clinical Trials Group

<http://pactg.s-3.com/>

Helena Hatch Special Care Center for Women (St. Louis)

http://hhscc.wustl.edu/docs/fr_index_contents.htm

Project A.R.K. - AIDS/HIV Resources for Kids (St. Louis)

<http://peds.wustl.edu/div/id/spec/>

HIV Disease Educational Opportunities for Health Professionals

Midwest AIDS Education and Training Centers (MATEC)

<http://www.uic.edu/depts/matec/>

AIDS Education Training Centers (AETC)

<http://www.aids-ed.org/>

CDC = Centers for Disease Control and Prevention

HRSA=Health Resources and Services Administration

USPHS = U.S. Public Health Service

STDs-Epidemiologic Reports

MDOH. **Sexually Transmitted Diseases: Scientific Studies and Reports** (Includes links to current and past editions of the Missouri *HIV/STD Epidemiologic Profiles* [formerly the KWIK Facts], as well as to current and past editions of *HIV/STD Statistics*.)

<http://www.dhss.state.mo.us/GLRequest/ID/SSRSTD.html>

CDC. **STD Surveillance & Statistics**

http://www.cdc.gov/nchstp/dstd/Stats_Trends/Stats_and_Trends.htm

STDs-Web Sites

DHSS. **Disease Directory: Chlamydia, Gonorrhea, Syphilis, Syphilis-Congenital** (From the DHSS Home Page main menu, click on "Resources", and then on "Disease Directory".)

<http://www.dhss.state.mo.us/>

DHSS. **Section of STD/HIV/AIDS Prevention & Care Services**

<http://www.dhss.state.mo.us/sshapcs/SSHAPCS.html>

CDC. **Sexually Transmitted Diseases: Facts & Information**

http://www.cdc.gov/nchstp/dstd/disease_info.htm

CDC. **CDC Division of STD Prevention Home Page**

<http://www.cdc.gov/nchstp/dstd/dstdp.html>

CDC. **National Prevention Information Network (NPIN) - STD Resources**

<http://www.cdcnpin.org/std/start.htm>

NIAID. **NIAID Publications on STDs**

<http://www.niaid.nih.gov/publications/stds.htm>

Healthfinder® (A gateway consumer health and human services information web site from the U.S. Government.)

<http://www.healthfinder.gov/default.htm>

STDs-Treatment/Prevention Information

Sexually Transmitted Diseases Treatment Guidelines 2002

<http://www.cdc.gov/std/treatment/default.htm>

DHSS. **STD Manual**

<http://www.dhss.state.mo.us/sshapcs/page 38.html>

STDs-Educational Opportunities for Health Professionals

St. Louis STD/HIV Prevention and Training Center

<http://std.wustl.edu/>

National STD/HIV Prevention and Training Center Network

<http://depts.washington.edu/nnptc/>

DHSS = Missouri Department of Health and Senior Services

CDC = Centers for Disease Control and Prevention

NIAID = National Institute of Allergy and Infectious Diseases

2001 Missouri HIV/STD Epi Profile

HIV Disease Epi Profile Summary: Missouri

Brief Summary of HIV Disease in Missouri, 1982-2001

Magnitude of the Problem

- From 1982 through 2001, 13,651 HIV Disease* cases in Missouri residents have been reported; 607 HIV Disease cases were initially reported in 2001.
- Of the 13,651 reported HIV Disease cases, 9,119 (66.8%) have progressed to the later stages of the disease process and are subcategorized as AIDS cases*. The remaining 4,532 (33.2%) HIV Disease cases are in the earlier stages of the disease process and are subcategorized as HIV cases*.
- Of the 13,651 reported HIV disease cases, 8,616 (63.1%) are currently living. Of these 8,616 persons, 4,262 (49.5%) have been diagnosed with AIDS, and the remaining 4,354 (50.5%) are HIV cases.
- Not all HIV-infected persons in Missouri have been diagnosed and reported. A general estimate of the total number of HIV-infected persons currently living in the state is in the range of 9,500 to 13,500. This estimate is consistent with the Centers for Disease Control and Prevention (CDC) statement that, nationwide, approximately 30% of HIV-infected persons are not aware that they are infected. (It should be noted that a recent report from CDC indicated that, among young gay and bisexual men infected with HIV, the percentage who do not know their infection status may be much higher.)
- Of the 9,119 reported AIDS cases, 4,857 (53.3%) are known to have died. In 2001, 150 HIV-related deaths in Missouri residents were reported on death certificates.
- The rate of reported AIDS cases in Missouri has been noticeably less than the rate nationwide. In 2000 (the most recent year for which national data are available), the AIDS rate per 100,000 population in Missouri was 8.2, compared to the U.S. rate of 14.4.

Who is Affected

- Males continue to make up the majority of reported HIV Disease cases, accounting for 77.3% of HIV cases, and 81.4% of AIDS cases, reported in 2001. However, certain populations of females appear to be increasingly affected by HIV Disease. Of AIDS cases reported in 2001, females made up 18.6%; by comparison, of AIDS cases reported five years previously (in 1996), only 12.1% were in females.
- Blacks are very disproportionately represented among reported HIV Disease cases and deaths. Although blacks make up only about 11% of Missouri's population, they accounted for 47.9% of HIV cases and 53.2% of AIDS cases reported in 2001. Significantly, beginning in 1999 and continuing through 2001, a larger number of HIV and AIDS cases were reported in blacks than in whites. The rate for HIV cases reported in 2001 in blacks (33.1) was 7.7 times the rate in whites (4.3). In addition, 45.3% of HIV-related deaths in 2001 were in blacks. Black females are particularly over-represented, as evidenced by the fact that they made up 65.6% of female HIV cases, and 71.0% of female AIDS cases, reported in 2001. (Blacks are also very disproportionately represented among reported cases of gonorrhea, chlamydia, and syphilis.)
- For Hispanics, the rates for HIV and AIDS cases reported in 2001 were approximately 2-1/2 times those seen in whites – but the total numbers of cases reported in Hispanics (10 HIV cases and 8 AIDS cases in 2001) have been small. However, because of demographic and other factors, there are some reasons for concern that HIV Disease might be, or might become, a more significant problem for Hispanics in Missouri than current numbers seem to indicate.
- Numbers of reported HIV and AIDS cases in Asians and American Indians have been very small; each of these two groups comprises less than 0.5% of total reported HIV and AIDS cases.
- The largest numbers of reported HIV Disease cases are in men who have sex with men (MSM), followed by heterosexual contacts. Of total reported HIV cases, it is estimated that approximately 64% are in MSM, 20% in heterosexual contacts, 9% in injecting drug users (IDUs), and 6% in men who have sex with men and inject drugs (MSM/IDUs). It is estimated that approximately 265 new HIV cases were diagnosed in MSM in 2001, 150 cases in heterosexual contacts, 30 cases in IDUs, and 20 cases in MSM/IDUs.

*The last page of this summary describes the terms HIV Disease, AIDS cases, and HIV cases.

HIV Disease Epi Profile Summary: Missouri

- **MSM:** HIV infection is a significant problem among both white and black MSM; more cases have been reported from white MSM, but black MSM are likely experiencing higher rates of infection. Most MSM who become infected with HIV likely do so while in their twenties or thirties; however, black MSM may, in general, be infected at somewhat younger ages compared to white MSM. Of total reported HIV cases in MSM, 73.5% were in men living in either St. Louis City, St. Louis County, or Kansas City at the time of diagnosis.
- **Heterosexual contacts:** The majority of reported heterosexual contact HIV Disease cases have been in women. Black women are especially affected, making up 46.3% of total reported heterosexual contact HIV cases (white women make up an additional 26.6%). Heterosexual contact is the predominant way that women are infected with HIV. The largest proportion of heterosexual contact cases were probably initially infected while in their twenties, but teenagers (especially females) are also being infected through heterosexual transmission (15.9% of black female heterosexual contact HIV cases, and 10.6% of white female heterosexual contact HIV cases, were diagnosed while in their teens).
- **IDUs and MSM/IDUs:** Sharing of syringes and other drug paraphernalia among persons who inject illicit drugs has been a less common means of transmitting HIV in Missouri compared to the situation in a number of other states. However, IDUs do make up approximately 10% of reported adult/adolescent HIV cases, and an additional 6% of reported adult/adolescent HIV cases are in MSM/IDUs. Males, and blacks, are disproportionately represented among reported HIV cases in IDUs, and black men are disproportionately represented among reported HIV cases in MSM/IDUs. It is important to emphasize that persons who inject illicit drugs can be at risk for acquiring and transmitting HIV not only through sharing injection equipment, but also through sexual contact.

Where are Cases Occurring

- Cases of HIV Disease disproportionately occur in the state's two major metropolitan areas (St. Louis and Kansas City). The highest rates of both HIV and AIDS cases, as well as the largest numbers of cases, are found in these two areas. St. Louis City consistently has the highest case rates, followed by Kansas City, St. Louis County, and Outstate Missouri[§].
- Of total reported HIV Disease cases, 70.2% were from St. Louis City, St. Louis County, or Kansas City (which together comprise 32.5% of the state's population). However, 3,522 cases of HIV Disease have been reported from Outstate Missouri (roughly equal to the number reported from Kansas City), and only 5 (4.4%) Missouri counties have no reported HIV or AIDS cases.

Trends

- The annual number of newly reported HIV Disease cases had decreased each year from 1992 through 2000. However, the 607 HIV Disease cases initially reported in Missouri residents in 2001 represented a 14.1% increase from the 532 cases reported in 2000.
- This same pattern is seen when HIV cases are examined by year of diagnosis. Here the annual number of diagnosed cases had been generally decreasing in recent years, but in 2001 (after making adjustments for reporting delays), approximately 475 HIV cases are believed to have been diagnosed, which would represent an increase of about 13% from the number of cases diagnosed in 2000.
- The increase in diagnosed HIV cases in 2001 was, in general, most noticeable in males, whites, and men who have sex with men (MSM), and in St. Louis City and (to a somewhat lesser extent) Kansas City. However, the increase in 2001 cases seen in MSM in St. Louis City included a noticeable increase in cases in black, as well as white, MSM. In addition, in Kansas City, increases in diagnosed HIV cases in 2001 occurred in men who have sex with men and inject drugs (MSM/IDUs) as well as in MSM.
- The decreases in recent years (prior to 2001) in annually diagnosed HIV cases were believed to reflect, at least in part, a decrease in new HIV infections, although other factors could also have played a role. Regarding the increase in diagnosed cases in 2001, surveillance staff in both St. Louis and Kansas City believe that some increases in new infections in MSM may have been occurring, although it is also felt that certain recent changes in surveillance practices may have additionally contributed to the reported increase in 2001 cases.
- Diagnosed cases in heterosexual contacts did not show a noticeable increase from 2000 to 2001. However, in recent years, and in contrast to the patterns seen with the other major exposure categories (MSM, IDU, MSM/IDU), the annual number of diagnosed HIV cases in heterosexual contacts has generally been increasing. This general upward trend in diagnosed heterosexual contact cases, has, however, only been seen in blacks. In whites, the annual number of diagnosed cases has essentially remained plateaued.

[§] The term "Outstate Missouri" refers to all of Missouri outside St. Louis City, St. Louis County, and Kansas City.

HIV Disease Epi Profile Summary: Missouri

- Improved antiretroviral therapies have slowed the progress of HIV Disease in many infected persons, an achievement especially reflected in the substantial decrease in reported AIDS cases in Missouri from 1996 to 1997, and in HIV Disease deaths from 1995 to 1997 (the mid-1990s were when the widespread introduction of highly active antiretroviral therapy, or HAART, occurred and had its greatest impact). Since the mid-1990s, the downward trend in AIDS cases has slowed, and the annual number of HIV Disease deaths has, despite a decrease in 2001, remained generally plateaued the past 5 years. These newer trends likely reflect, at least in part, the limitations associated with current treatment regimens, and point to the need for continued strong emphasis on primary prevention of HIV infection.
- The ability of improved treatments to extend the lifespan of AIDS patients is reflected in the consistent increase in the number of persons living with AIDS in recent years, even though the annual numbers of new AIDS cases have been decreasing. At the end of 2001, 4,262 persons who were Missouri residents at the time of diagnosis were living with AIDS; the corresponding numbers for 2000, 1999, 1998, 1997, and 1996 were 4,049, 3,784, 3,496, 3,235, and 3,055, respectively.

HIV Disease Cases, HIV Cases, and AIDS Cases: A Summary of Terms Used in Describing the Epidemiology of HIV AIDS in Missouri.

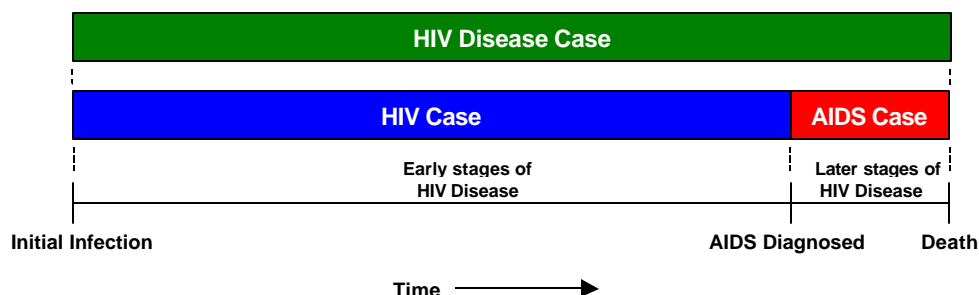
From the time a person is infected with human immunodeficiency virus (HIV) until death, he/she has HIV Disease. All persons with HIV Disease can be subclassified as either an AIDS case (if they are in the later stages of the disease process and have met the case definition for AIDS) or an HIV case (if they are in the earlier stages of the disease process and have not met the AIDS case definition).

To understand the epidemiology (i.e., occurrence) of HIV Disease in Missouri, it is necessary to examine not only HIV Disease cases, but also the subcategories of AIDS cases and HIV cases. The patterns of occurrence of AIDS cases (and deaths) are the result not only of past trends in HIV infections, but also access to, utilization of, and the effectiveness of available treatments. In recent years, with the advent of highly active antiretroviral therapy (HAART), treatment-related issues have become very important factors in determining numbers of new AIDS cases (and deaths), and trends in AIDS cases can no longer be seen as reflecting trends in new HIV infections. HIV cases, which generally represent persons more recently infected, can potentially provide information regarding current HIV infection trends. HIV cases can also provide information on which subpopulations are presently at increased risk for acquiring HIV infection, and toward which prevention efforts should be targeted.

HIV/STD Statistics

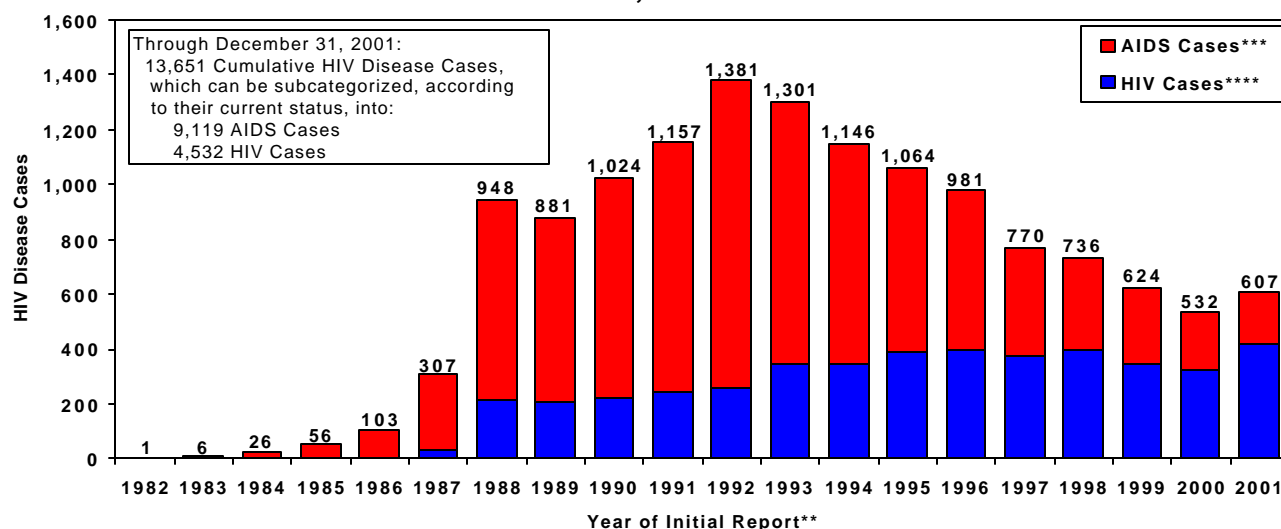
December 2001

Relationship of HIV Disease Cases, HIV Cases, and AIDS Cases

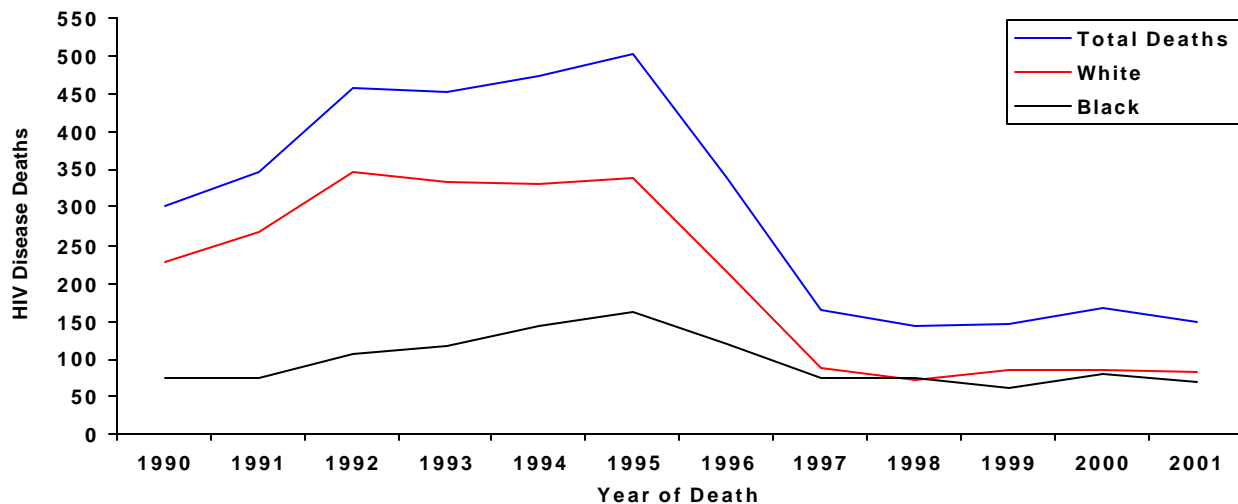


From the time a person is infected with human immunodeficiency virus (HIV) until death, he/she has **HIV Disease**. All persons with HIV Disease can be subclassified as either an **AIDS case** (if they are in the later stages of the disease process and have met the case definition for AIDS) or an **HIV case** (if they are in the earlier stages of the disease process and have not met the AIDS case definition).

Reported HIV Disease Cases by Current Status* and Year of Initial Report** Missouri, 1982-2001

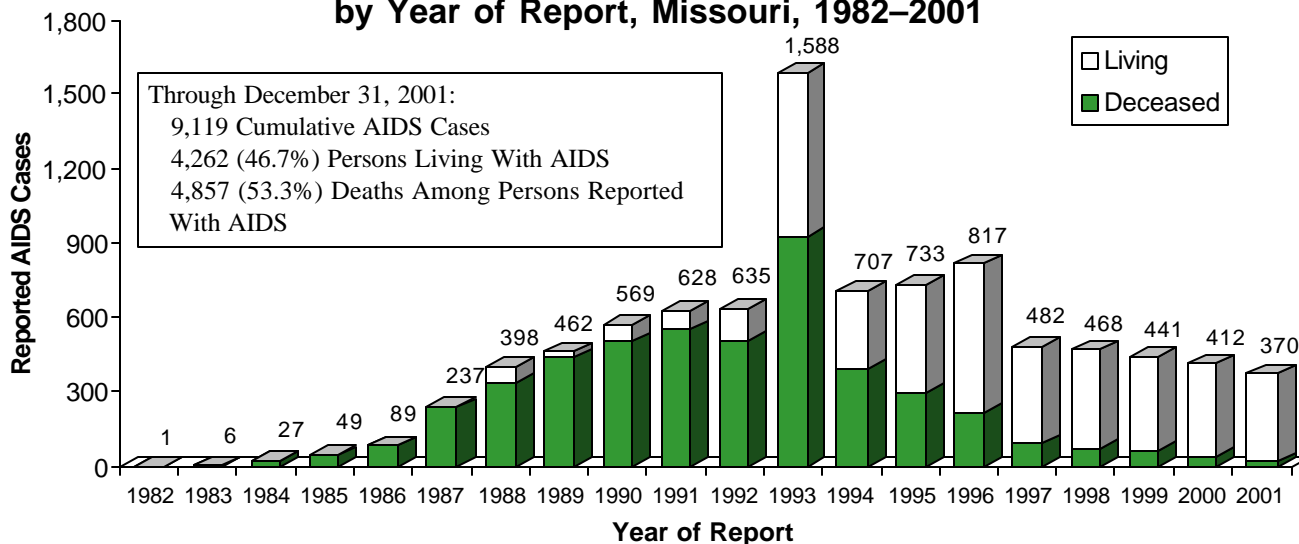


HIV Disease Deaths* by Race and Year of Death Missouri, 1990-2001



* Based on death certificate data.

Persons Diagnosed With AIDS (Living and Deceased) by Year of Report, Missouri, 1982–2001



Reported HIV and AIDS Cases by Gender, Race/Ethnicity, and Age at Diagnosis, Missouri, 1982–2001

	HIV Cases*				AIDS Cases**				HIV/AIDS Cases	
	Reported 2001 Cases	%	Cumulative* Cases	%	Reported 2001 Cases	%	Cumulative Cases	%	Cumulative Cases	%
Gender										
Male	326	(77.3%)	3,756	(82.9%)	301	(81.4%)	8,225	(90.2%)	11,981	(87.8%)
Female	96	(22.7%)	776	(17.1%)	69	(18.6%)	894	(9.8%)	1,670	(12.2%)
Race/Ethnicity										
White	201	(47.6%)	2,445	(53.9%)	160	(43.2%)	5,914	(64.9%)	8,359	(61.2%)
Black	202	(47.9%)	1,935	(42.7%)	197	(53.2%)	2,966	(32.5%)	4,901	(35.9%)
Hispanic	10	(2.4%)	104	(2.3%)	8	(2.2%)	182	(2.0%)	286	(2.1%)
Asian/Pacific Islander	1	(0.2%)	14	(0.3%)	5	(1.4%)	25	(0.3%)	39	(0.3%)
American Indian	0	(0.0%)	13	(0.3%)	0	(0.0%)	32	(0.4%)	45	(0.3%)
Unknown	8	(1.9%)	21	(0.5%)	0	(0.0%)	0	(0.0%)	21	(0.2%)
Race/Ethnicity and Gender										
White Male	173	(41.0%)	2,152	(47.5%)	142	(38.4%)	5,535	(60.7%)	7,687	(56.3%)
Black Male	139	(32.9%)	1,475	(32.5%)	148	(40.0%)	2,470	(27.1%)	3,945	(28.9%)
Hispanic Male	7	(1.7%)	90	(2.0%)	6	(1.6%)	169	(1.9%)	259	(1.9%)
Asian/Pacific Islander Male	1	(0.2%)	10	(0.2%)	5	(1.4%)	22	(0.2%)	32	(0.2%)
American Indian Male	0	(0.0%)	12	(0.3%)	0	(0.0%)	29	(0.3%)	41	(0.3%)
Unknown Male	6	(1.4%)	17	(0.4%)	0	(0.0%)	0	(0.0%)	17	(0.1%)
White Female	28	(6.6%)	293	(6.5%)	18	(4.9%)	379	(4.2%)	672	(4.9%)
Black Female	63	(14.9%)	460	(10.2%)	49	(13.2%)	496	(5.4%)	956	(7.0%)
Hispanic Female	3	(0.7%)	14	(0.3%)	2	(0.5%)	13	(0.1%)	27	(0.2%)
Asian/Pacific Islander Female	0	(0.0%)	4	(0.1%)	0	(0.0%)	3	(0.0%)	7	(0.1%)
American Indian Female	0	(0.0%)	1	(0.0%)	0	(0.0%)	3	(0.0%)	4	(0.0%)
Unknown Female	2	(0.5%)	4	(0.1%)	0	(0.0%)	0	(0.0%)	4	(0.0%)
Age at Diagnosis†										
<13	4	(0.9%)	45	(1.0%)	1	(0.3%)	57	(0.6%)	102	(0.7%)
13-19	18	(4.3%)	210	(4.6%)	4	(1.1%)	96	(1.1%)	306	(2.2%)
20-24	56	(13.3%)	704	(15.6%)	15	(4.1%)	542	(5.9%)	1,246	(9.1%)
25-29	65	(15.4%)	995	(22.0%)	40	(10.8%)	1,486	(16.3%)	2,481	(18.2%)
30-34	58	(13.7%)	989	(21.8%)	73	(19.7%)	2,265	(24.8%)	3,254	(23.8%)
35-39	91	(21.6%)	731	(16.1%)	83	(22.4%)	1,892	(20.7%)	2,623	(19.2%)
40-44	58	(13.7%)	437	(9.6%)	63	(17.0%)	1,250	(13.7%)	1,687	(12.4%)
45-49	38	(9.0%)	226	(5.0%)	44	(11.9%)	727	(8.0%)	953	(7.0%)
50+	34	(8.1%)	195	(4.3%)	47	(12.7%)	804	(8.8%)	999	(7.3%)
Missouri Total	422 (100.0%)		4,532 (100.0%)		370 (100.0%)		9,119 (100.0%)		13,651 (100.0%)	

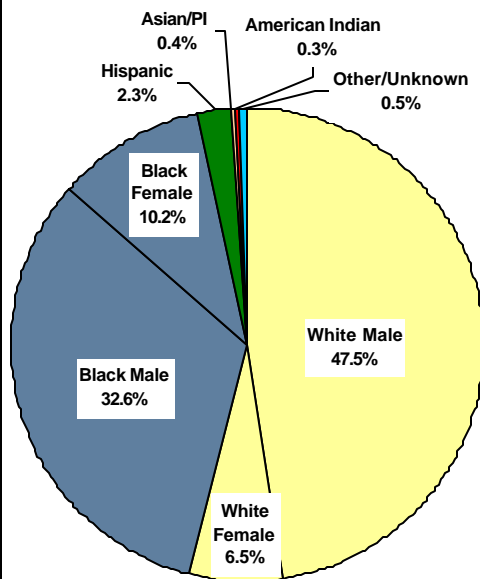
* HIV Cases—Persons with HIV infection who have not developed one of the specific diseases or conditions which would cause them to meet the case definition for AIDS.

** AIDS Cases—Persons with HIV infection who have developed one or more of the specific diseases or conditions which cause them to meet the AIDS case definition.

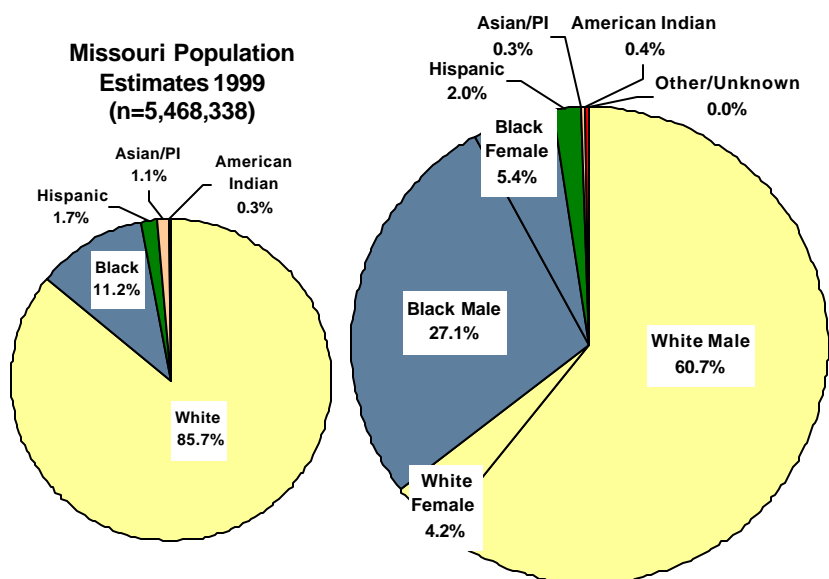
† For HIV Cases, Age at Diagnosis is the age at which the individual was first diagnosed with HIV infection.

For AIDS Cases, Age at Diagnosis is the age at which the individual was first diagnosed with AIDS.

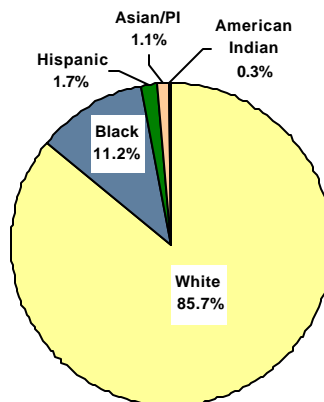
Reported HIV Cases by Race/Ethnicity and (for Whites and Blacks) Gender, Missouri, 1985–2001 (n=4,532)



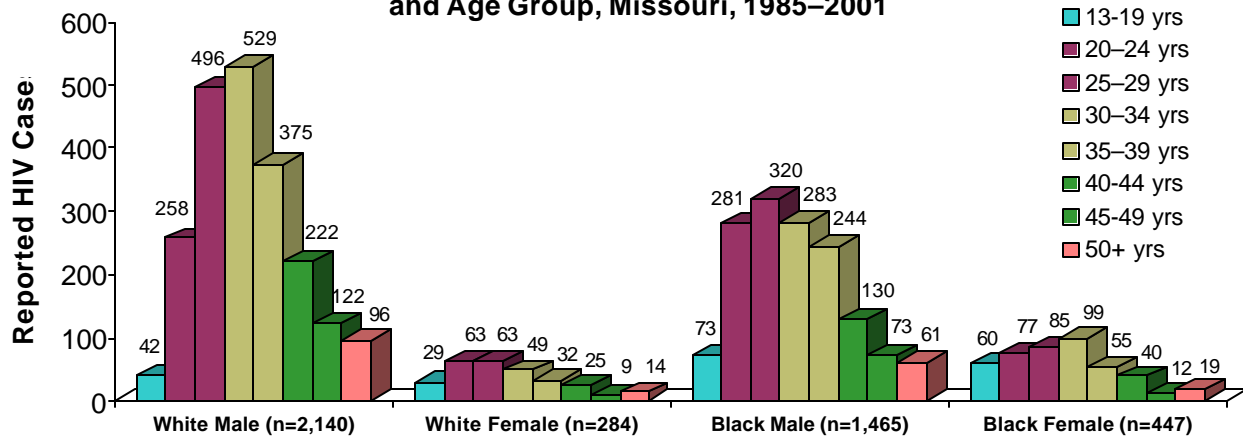
Reported AIDS Cases by Race/Ethnicity and (for Whites and Blacks) Gender, Missouri, 1982–2001 (n=9,119)



Missouri Population Estimates 1999 (n=5,468,338)

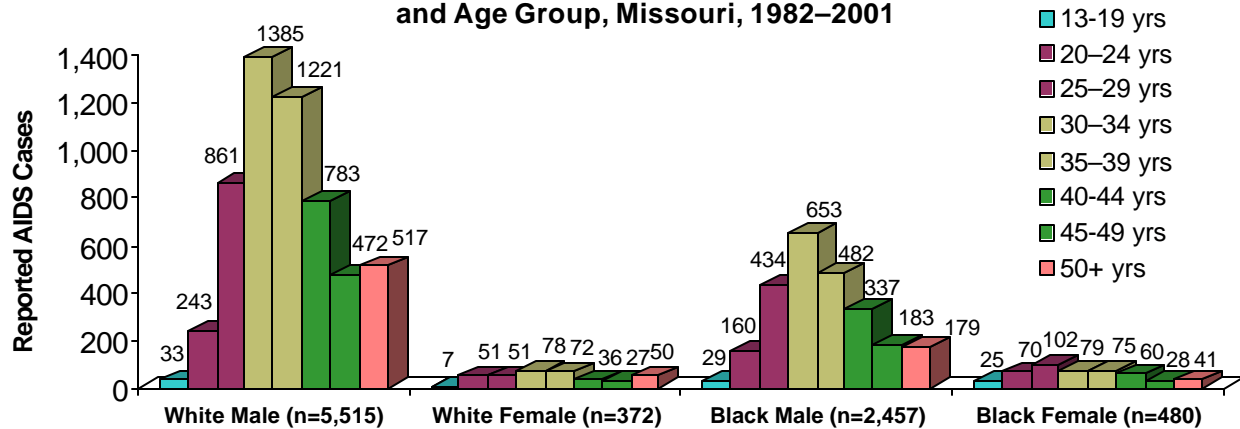


Reported Adult/Adolescent HIV Cases by Race/Ethnicity, Gender, and Age Group, Missouri, 1985–2001



Race/Ethnicity and Gender

Reported Adult/Adolescent AIDS Cases by Race/Ethnicity, Gender, and Age Group, Missouri, 1982–2001



Race/Ethnicity and Gender

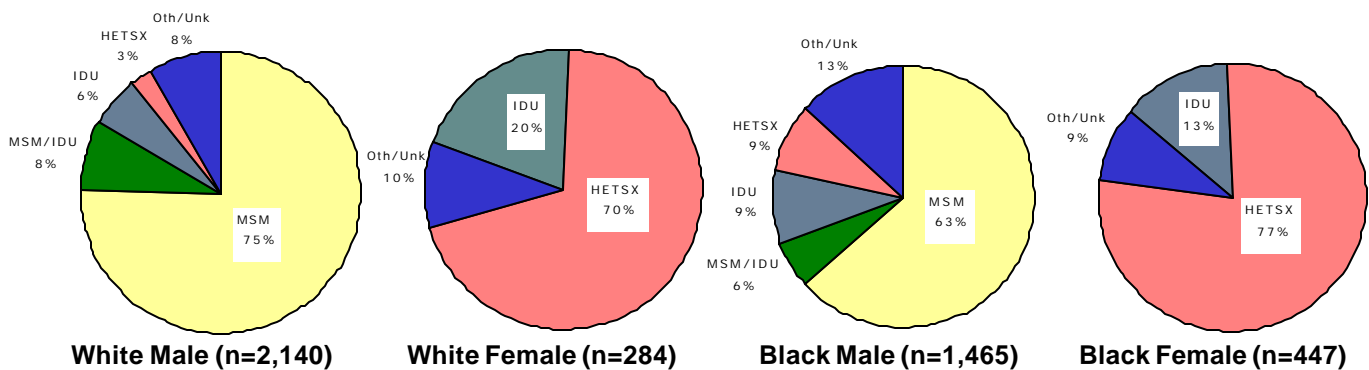
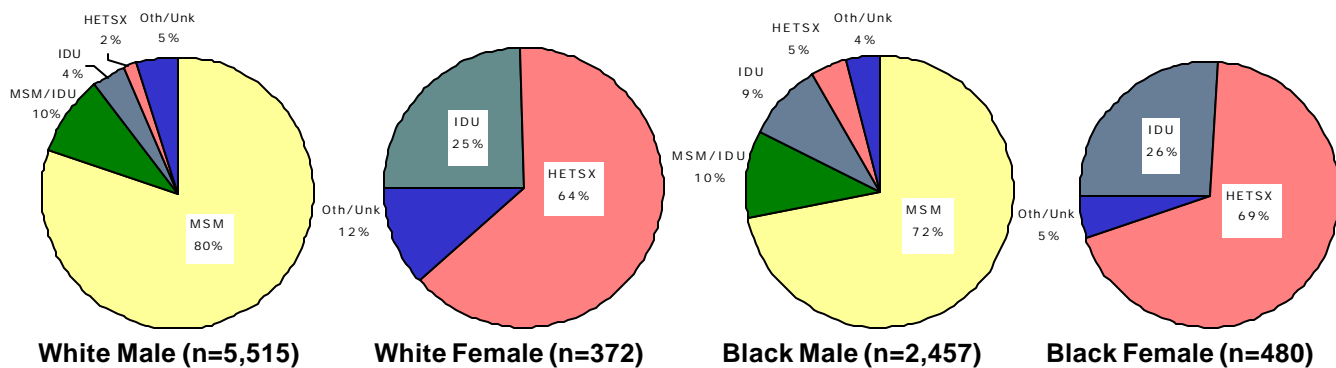
Reported HIV and AIDS Cases by Exposure Category, Missouri, 1982–2001

Exposure Category [†]	HIV Cases*				AIDS Cases**				HIV/AIDS Cases	
	Reported 2001		Cumulative		Reported 2001		Cumulative		Cumulative	
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
MSM	166	(39.3%)	2,621	(57.8%)	194	(52.4%)	6,335	(69.5%)	8,956	(65.6%)
MSM/IDU	10	(2.4%)	265	(5.8%)	17	(4.6%)	794	(8.7%)	1,059	(7.8%)
IDU	18	(4.3%)	392	(8.6%)	37	(10.0%)	680	(7.5%)	1,072	(7.9%)
Heterosexual Contact	78	(18.5%)	748	(16.5%)	68	(18.4%)	792	(8.7%)	1,540	(11.3%)
Adult Hemophiliac	1	(0.2%)	30	(0.7%)	1	(0.3%)	145	(1.6%)	175	(1.3%)
Adult Transfusion	2	(0.5%)	15	(0.3%)	3	(0.8%)	101	(1.1%)	116	(0.8%)
Other/Unknown Adult	143	(33.9%)	416	(9.2%)	48	(13.0%)	204	(2.2%)	620	(4.5%)
Perinatal Transmission	3	(0.7%)	37	(0.8%)	1	(0.3%)	46	(0.5%)	83	(0.6%)
Other/Unknown Pediatric	1	(0.2%)	8	(0.2%)	1	(0.3%)	22	(0.2%)	30	(0.2%)
Missouri Total	422	(100.0%)	4,532	(100.0%)	370	(100.0%)	9,119	(100.0%)	13,651	(100.0%)

*HIV Cases-Persons with HIV infection who have not developed one of the specific diseases or conditions which would cause them to meet the case definition for AIDS.

**AIDS Cases-Persons with HIV infection who have developed one or more of the specific diseases or conditions which cause them to meet the AIDS case definition.

†MSM=men who have sex with men; MSM/IDU=men who have sex with men and inject drugs; IDU=injecting drug users

Reported Adult/Adolescent HIV Cases by Exposure Category[†], Missouri, 1985–2001Reported Adult/Adolescent AIDS Cases by Exposure Category[†], Missouri, 1982–2001

†MSM=men who have sex with men; MSM/IDU=men who have sex with men and inject drugs; IDU=injecting drug users; HETSX=heterosexual contact; Oth/Unk=Other/Unknown

Reported HIV and AIDS Cases and Rates by Area of Residence at Time of Diagnosis, Missouri, 1982–2001

Geographic Area	HIV Cases*				AIDS Cases**			
	Reported 2001		Cumulative		Reported 2001		Cumulative	
	Cases	%	Rate***	Cases	%	Rate***	Cases	%
Location								
St. Louis City [†]	135	(32.0%)	40.4	1,326	(29.3%)	41.9	2,582	(28.3%)
St. Louis County [†]	64	(15.2%)	6.4	599	(13.2%)	6.4	1,416	(15.5%)
Kansas City [†]	89	(21.1%)	20.3	1,131	(25.0%)	16.7	2,535	(27.8%)
Outstate [†]	104	(24.6%)	2.8	1,154	(25.5%)	2.3	2,368	(26.0%)
Missouri Correctional Facilities ^{††}	30	(7.1%)	--	322	(7.1%)	--	218	(2.4%)
Missouri Total	422	(100.0%)	7.7	4,532	(100.0%)	6.8	9,119	(100.0%)

*HIV Cases-Persons with HIV infection who have not developed one of the specific diseases or conditions which would cause them to meet the case definition for AIDS.

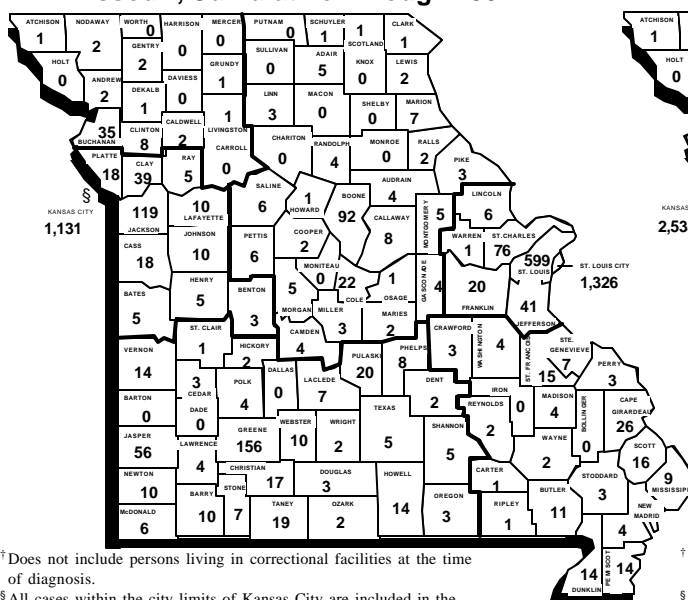
**AIDS Cases-Persons with HIV infection who have developed one or more of the specific diseases or conditions which cause them to meet the AIDS case definition.

***Per 100,000 population, based on 1999 population estimates.

†Does not include persons living in correctional facilities at the time of diagnosis. These persons are included in the "Missouri Correctional Facilities" category.

††Includes state, county and local correctional facilities.

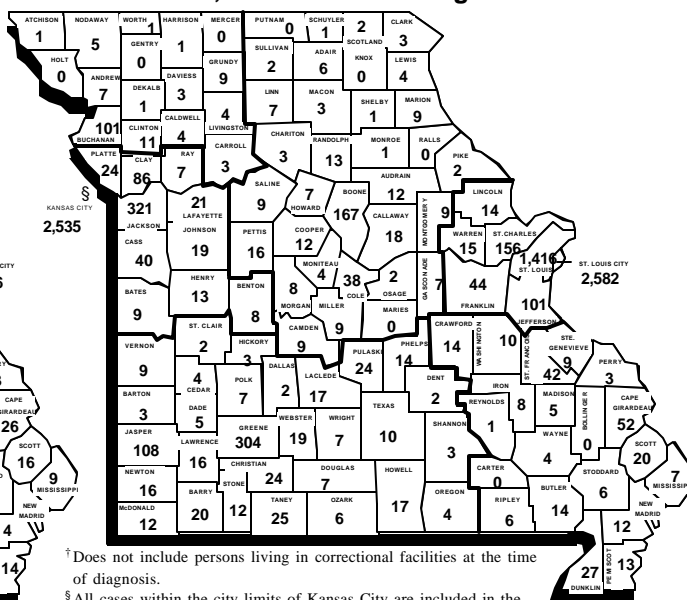
Reported HIV Cases by County of Residence at Time of Diagnosis[†]
Missouri, Cumulative Through 2001



[†] Does not include persons living in correctional facilities at the time of diagnosis.

[§] All cases within the city limits of Kansas City are included in the totals for Kansas City. Cases indicated in Jackson, Clay and Platte counties are outside the city limits of Kansas City.

Reported AIDS Cases by County of Residence at Time of Diagnosis[†]
Missouri, Cumulative Through 2001



[†] Does not include persons living in correctional facilities at the time of diagnosis.

[§] All cases within the city limits of Kansas City are included in the totals for Kansas City. Cases indicated in Jackson, Clay and Platte counties are outside the city limits of Kansas City.

Reported HIV Cases by Race/Ethnicity and Area of Residence at Time of Diagnosis, Missouri, 2001

Geographic Area	Total		White		Black		Hispanic	
	2001 Cases	Rate*	2001 Cases	Rate*	2001 Cases	Rate*	2001 Cases	Rate*
St. Louis City [†]	135	40.4	39	26.5	90	51.1	2	34.1
St. Louis County [†]	64	6.4	28	3.5	34	20.6	1	7.3
Kansas City [†]	89	20.3	40	14.3	45	34.6	4	21.2
Outstate [†]	104	2.8	81	2.3	16	11.4	3	5.7
Missouri Correctional Facilities ^{††}	30	--	13	--	17	--	0	--
Missouri Total	422	7.7	201	4.3	202	33.1	10	10.9

* Per 100,000 population, based on 1999 population estimates.

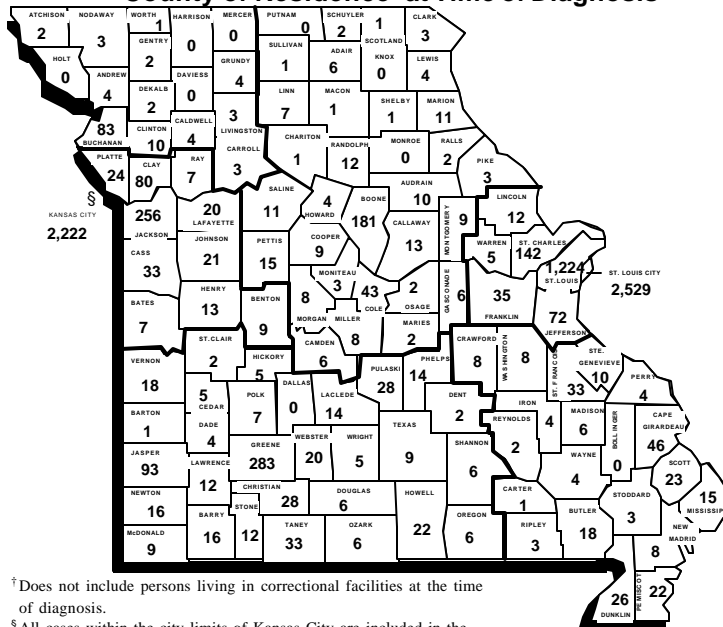
[†] Does not include persons living in correctional facilities at the time of diagnosis. These persons are included in the "Missouri Correctional Facilities" category.

^{††} Includes state, county and local correctional facilities.

Currently Living HIV-Diagnosed Persons (HIV and AIDS Cases) Who Were Residents of Missouri at the Time of Diagnosis, and Who Were Reported Through 2001, by Gender and Race/Ethnicity

	Living HIV-Diagnosed Persons	%
Gender		
Male	7,336	85.1%
Female	1,280	14.9%
Race/Ethnicity		
White	4,845	56.2%
Black	3,500	40.6%
Hispanic	195	2.3%
Asian/Pacific Islander	27	0.3%
American Indian	28	0.3%
Unknown	21	0.2%
Race/Ethnicity and Gender		
White Male	4,361	50.6%
Black Male	2,739	31.8%
Hispanic Male	172	2.0%
Asian/Pacific Islander Male	20	0.2%
American Indian Male	27	0.3%
Unknown Male	17	0.2%
White Female	484	5.6%
Black Female	761	8.8%
Hispanic Female	23	0.3%
Asian/Pacific Islander Female	7	0.1%
American Indian Female	1	0.0%
Unknown Female	4	0.0%
Total Living HIV-Diagnosed Persons	8,616	100.0%

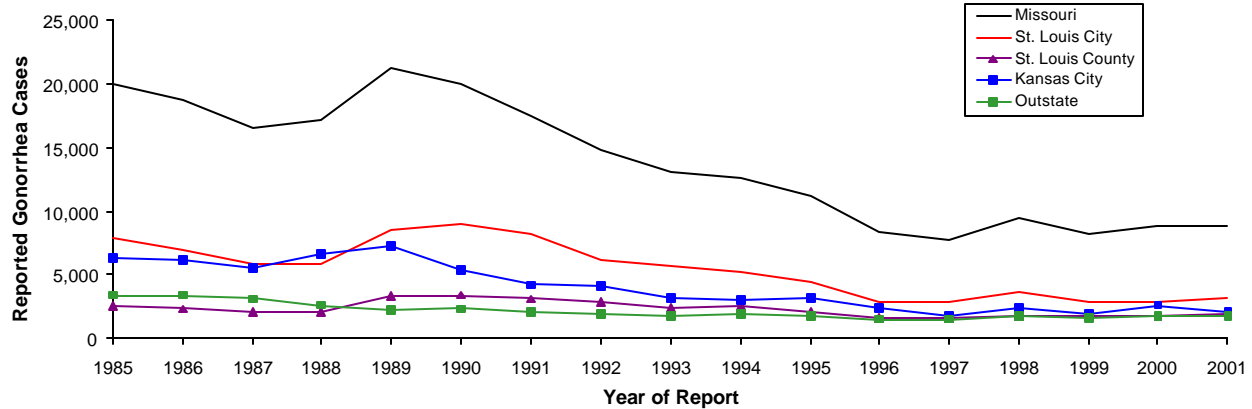
Currently Living HIV-Diagnosed Persons (HIV and AIDS Cases), Reported Through 2001, by Missouri County of Residence[†] at Time of Diagnosis



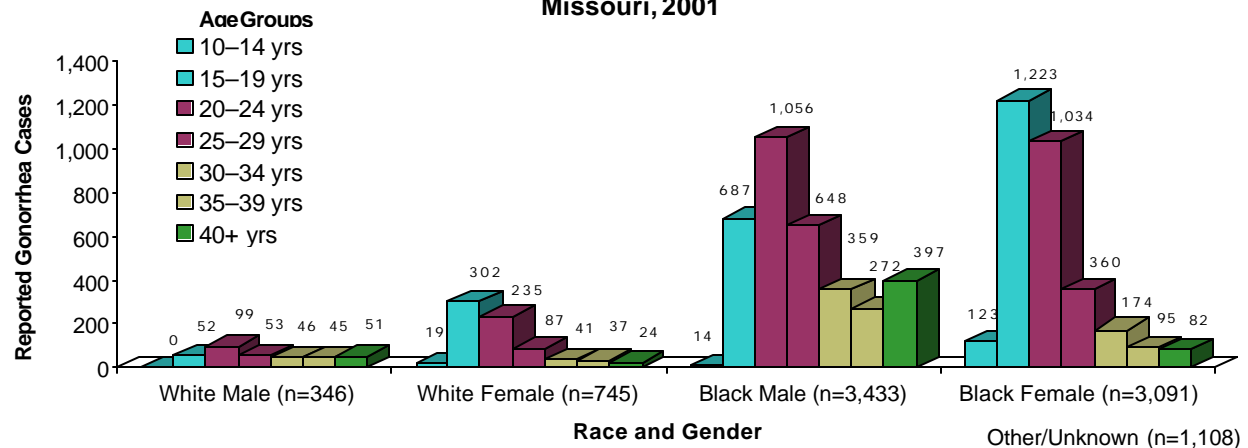
[†] Does not include persons living in correctional facilities at the time of diagnosis.

[§] All cases within the city limits of Kansas City are included in the totals for Kansas City. Cases indicated in Jackson, Clay and Platte counties are outside the city limits of Kansas City.

**Reported Gonorrhea Cases by Geographic Area and Year of Report
Missouri, 1985-2001**



**Reported Gonorrhea Cases by Race, Gender and Age Group
Missouri, 2001**

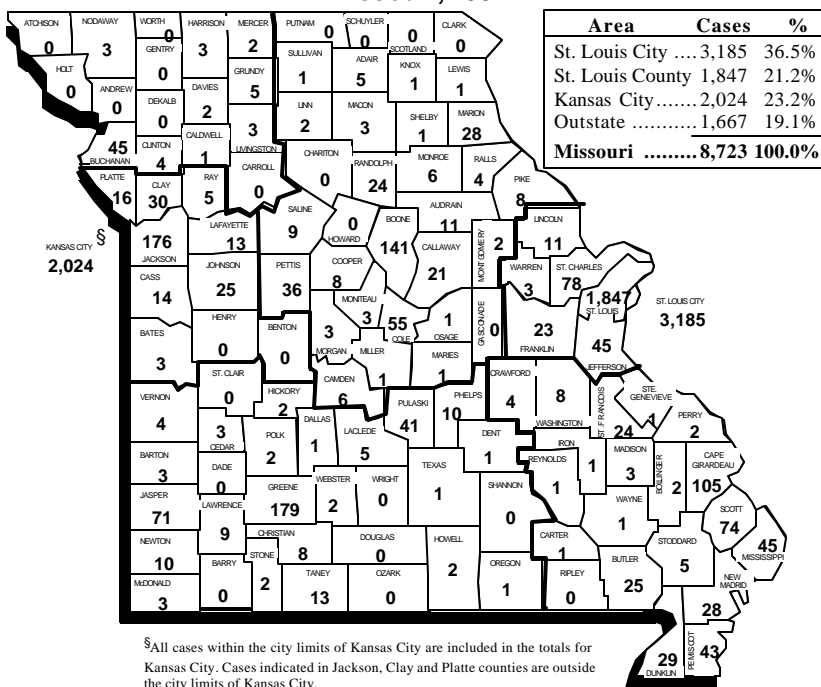


Reported Gonorrhea Cases and Rates by Geographic Area, Missouri, 2001

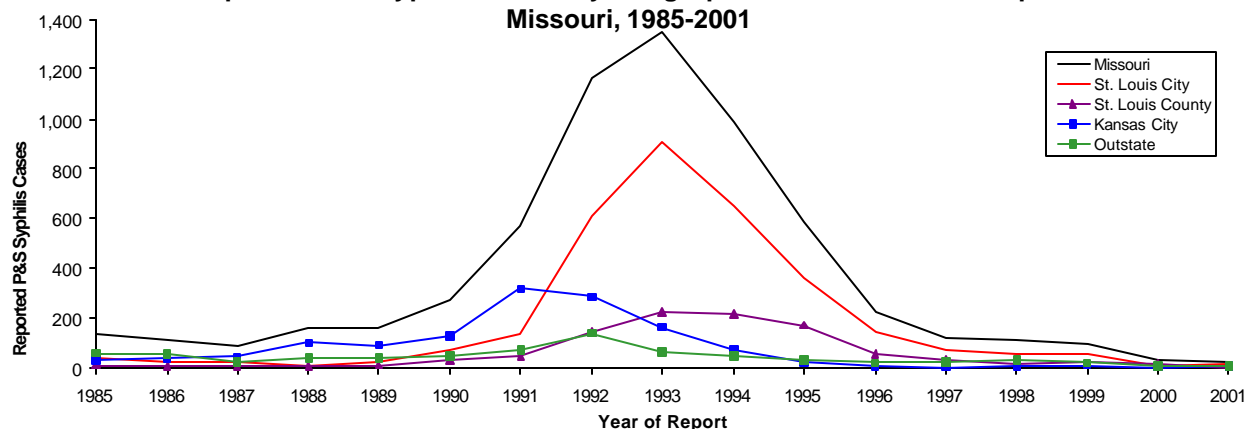
	Cases	%	Rate*
Missouri			
Whites	1,098	12.6%	23.4
Blacks	6,562	75.2%	1,074.0
Other/Unknown	1,063	12.2%	--
Total Cases	8,723	100.0%	159.5
St. Louis City			
Whites	132	4.1%	89.7
Blacks	2,707	85.0%	1,535.8
Other/Unknown	346	10.9%	--
Total Cases	3,185	100.0%	953.7
St. Louis County			
Whites	120	6.5%	15.1
Blacks	1,484	80.3%	900.6
Other/Unknown	243	13.2%	--
Total Cases	1,847	100.0%	185.4
Kansas City			
Whites	181	9.0%	64.8
Blacks	1,672	82.6%	1,284.3
Other/Unknown	171	8.4%	--
Total Cases	2,024	100.0%	462.3
Outstate			
Whites	665	39.8%	19.2
Blacks	699	41.9%	500.8
Other/Unknown	303	18.2%	--
Total Cases	1,667	100.0%	45.1

*Per 100,000 population

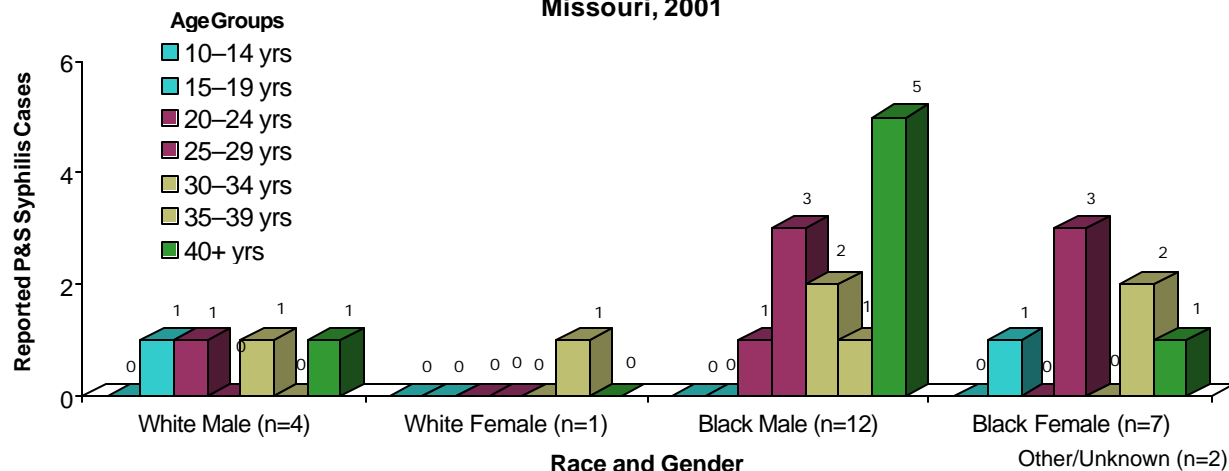
**Reported Gonorrhea Cases by County
Missouri, 2001**



**Reported P&S Syphilis Cases by Geographic Area and Year of Report
Missouri, 1985-2001**



**Reported P&S Syphilis Cases by Race, Gender and Age Group
Missouri, 2001**

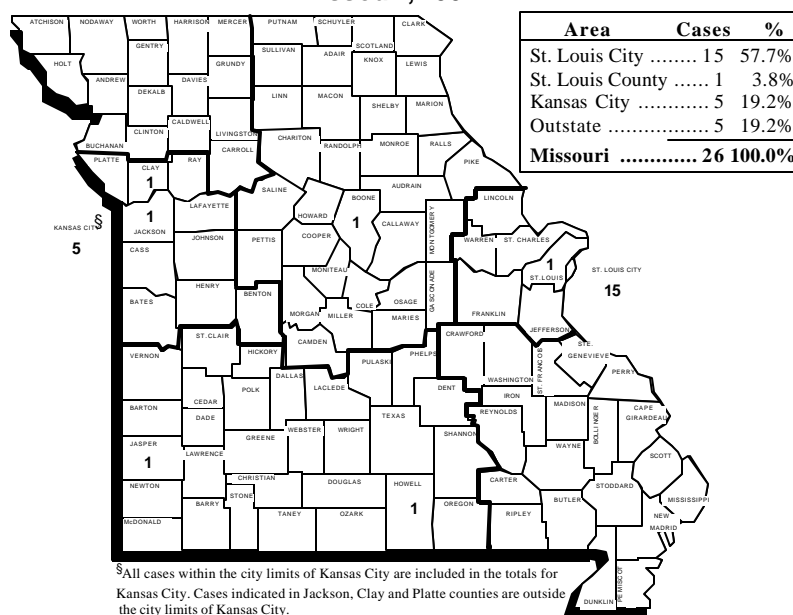


Reported P&S Syphilis Cases and Rates by Geographic Area, Missouri, 2001

	Cases	%	Rate*
Missouri			
Whites	5	19.2%	0.1
Blacks	19	73.1%	3.1
Other/Unknown	2	7.7%	--
Total Cases	26	100.0%	0.5
St. Louis City			
Whites	1	6.7%	0.7
Blacks	14	93.3%	7.9
Other/Unknown	0	0.0%	--
Total Cases	15	100.0%	4.5
St. Louis County			
Whites	0	0.0%	0.0
Blacks	0	0.0%	0.0
Other/Unknown	1	100.0%	--
Total Cases	1	100.0%	0.1
Kansas City			
Whites	2	28.6%	0.7
Blacks	3	57.1%	2.3
Other/Unknown	0	14.3%	--
Total Cases	5	100.0%	1.6
Outstate			
Whites	2	40.0%	0.1
Blacks	2	40.0%	1.4
Other/Unknown	1	10.0%	--
Total Cases	5	100.0%	0.1

*Per 100,000 population

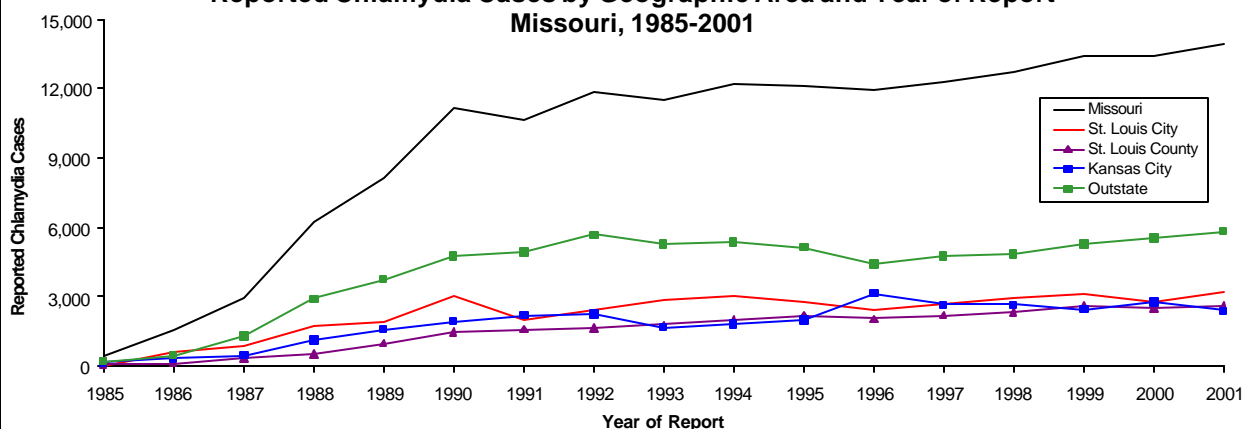
**Reported P&S Syphilis Cases by County
Missouri, 2001**



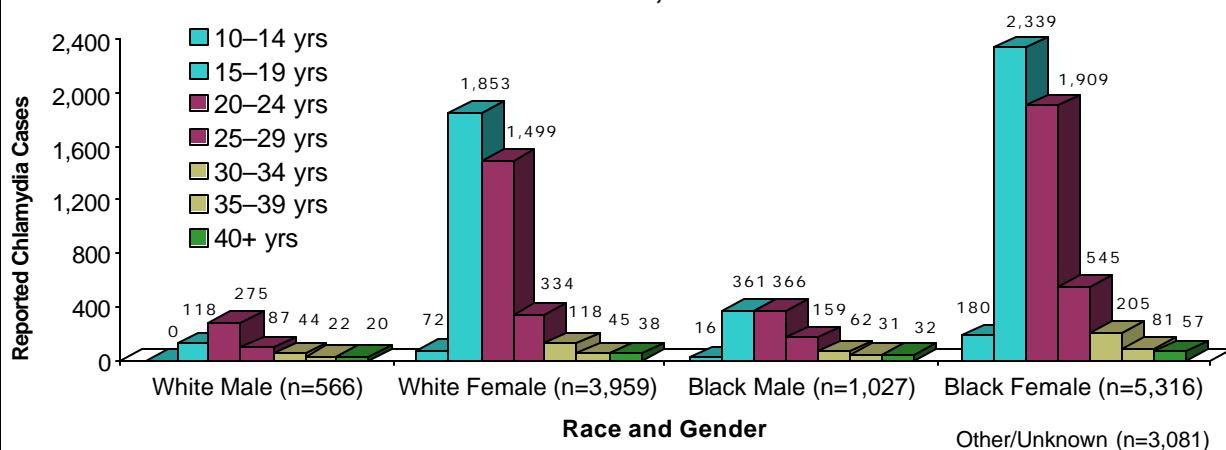
Congenital Syphilis: 5 Congenital Syphilis cases were reported in 2001

5 (100.0%) African American 4 (80.0%) St. Louis City
1 (10.0%) St. Louis County

**Reported Chlamydia Cases by Geographic Area and Year of Report
Missouri, 1985-2001**



**Reported Chlamydia Cases by Race, Gender and Age Group
Missouri, 2001**

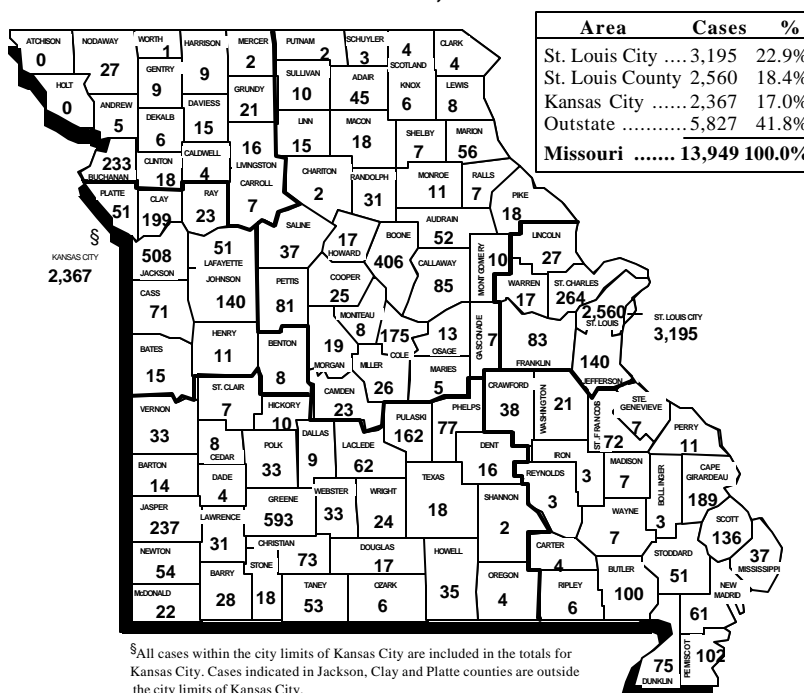


**Reported Chlamydia Cases
and Rates by Geographic Area,
Missouri, 2001**

	Cases	%	Rate*
Missouri			
Whites	4,563	32.7%	97.3
Blacks	6,400	45.9%	1,047.5
Other/Unknown ...	2,986	21.4%	--
Total Cases	13,949	100.0%	255.1
St. Louis City			
Whites	162	5.1%	110.1
Blacks	2,333	73.0%	1,323.6
Other/Unknown	700	21.9%	--
Total Cases	3,195	100.0%	956.7
St. Louis County			
Whites	338	13.2%	42.4
Blacks	1,662	64.9%	1,008.6
Other/Unknown	560	21.9%	--
Total Cases	2,560	100.0%	257.0
Kansas City			
Whites	458	19.3%	164.0
Blacks	1,453	61.4%	1,116.1
Other/Unknown	456	19.3%	--
Total Cases	2,367	100.0%	540.7
Outstate			
Whites	3,607	61.8%	104.1
Blacks	955	16.4%	683.3
Other/Unknown ...	1,265	21.8%	--
Total Cases	5,827	100.0%	157.5

*Per 100,000 population

**Reported Chlamydia Cases by County
Missouri, 2001**



§All cases within the city limits of Kansas City are included in the totals for Kansas City. Cases indicated in Jackson, Clay and Platte counties are outside the city limits of Kansas City.